DOCUMENT RESUME

ED 274 488 RC 015 931

AUTHOR Jackson, Ronald B.
TITLE A Study of Y.W.C.A. Services Performed for Pregnant and Parenting High School Students of El Paso from 1982 to 1985.
INSTITUTION SchoolCraft Consultants, El Paso, TX.
SPONS AGENCY Texas State Dept. of Human Resources, Austin.
PUB DATE 15 Jul 86
NOTE 111p.
PUB TYPE Reports - Research/Technical (143)

EDRS PRICE MF01/PC05 Plus Postage.
DESCRIPTORS Agency Cooperation; Anglo Americans; Birth Rate; *Child Abuse; Coordination; Early Parenthood; Educational Cooperation; *Educational Policy; Guidance Centers; High Schools; High School Students; Mexican Americans; Outreach Programs; Parenthood Education; *Pregnant Students; Private Agencies; Program Effectiveness; *Program Improvement; Socioeconomic Influences; *Student Needs; Student Rights; Unwed Mothers; Urban Demography; Youth Problems
IDENTIFIERS *Texas (El Paso); *Young Womens Christian Association

ABSTRACT

Questionnaires and interviews were used to study the effectiveness of programs provided for pregnant and parenting students by the Young Women's Christian Association (YWCA) of El Paso, Texas. The study focused on the School-Age Parent Center (SPC), established in 1974 by the El Paso Independent School District, and the YWCA programs and services offered there. Data on school-related variables were obtained for the 731 girls enrolled in grades 9 to 12 in the SPC programs from 1979 to 1985. The girls were primarily Spanish, Anglo, Black, and American Indian. Based on data analysis, eight recommendations were made for program improvement: (1) data gathering must be continued; (2) more girls must be served; (3) the SPC should become a diploma granting high school; (4) SPC's principal should coordinate all services for pregnant girls in the El Paso Public Schools; (5) a comprehensive program of education, medical care, and support should be provided; (6) support should begin as soon as pregnancy is recognized and continue until at least 1 year after completing high school; (7) the counseling program should be strengthened; and (8) the local Department of Human Services should make greater use of data available on cases of reported child abuse. (JHZ)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED274488

A STUDY OF Y.W.C.A. SERVICES PERFORMED FOR PREGNANT AND PARENTING HIGH SCHOOL STUDENTS OF EL PASO FROM 1982 TO 1985

BY RONALD B. JACKSON, Ed. D.

PRESIDENT, SCHOOLCRAFT CONSULTANTS

JULY 15, 1986

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY
Ronald B. Jackson
TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

RC015931

FUNDS WERE PROVIDED FOR

THIS STUDY BY THE

TEXAS DEPARTMENT OF HUMAN SERVICES

ADVISORY COMMITTEE TO THE STUDY

Betty Dodson, Director, Project Redirection

Myrna Deckert, Executive Director, Y.W.C.A

Charles Gemblnski, Jr., MSSW, CSW-ACP Regional Program Manager
Children's Protective Services
Texas Department of Human Services

Anne L.M. Hernandez, Day Care Executive, Y.W.C.A.

Jeanne Saunders, Director, Research and Evaluation El Paso. I.S.D.

Lisa Washburn, Contract Manger, Department of Human Services

CONTENTS

		PAGE
Acknowledgements		iv
Foreword		v
Chapter I	Perspectives On The Future	1
Chapter II	The Setting	16
Chapter III	What Research Tells Us	28
Chapter IV	The Results	60
Chapter V	Recommendations	93
	Appendices	99

ACKNOWLEDGEMENTS

My wife, Lisa, has once again proved to be of inestimable support and assistance. Many others contributed to the study and are forthwith listed. Responsibility for the results and recommendations rests with me.

R.B.J.

Assisting with this study:

Mary Beth Alderman, TX
Billie Castaneda, TX
Lucy Eddinger, Washington, D.C.
Caroline Gaston, NM
Pamela Hiler, MO
Betty Hoover, TX
Virginia Kamendo, TX
Betty J. Kinsinger, TX
Gail Larimer, TX
Carolyn McCain, TX
Shirley A. McKinney, MA
Anita M. Mitchell, CA
Mary Polk, TX
Sharon Rodine, Washington, D.C.
Mark W. Rosa, AZ
Helen Sikes, TX

The secretary of the EPISD School-Age Parent Center, Michelle Cicchatti

and the registrars of the EPISD High Schools:

Connie Frescos
Carol Hernandez
Elizabeth Oliver
Elvia Pacillas
Valia Sandoval
Marge Saunders
Linda Shelfer
Eleanor Yudico

Aides to Anne Hernandez: Diane Dorsey and Marta Fraine

Special thanks goes to the patient typist, Elma Lanning

FOREWORD

In matters of sex we typically say one thing and do another. Sensitive to and confused by the contradiction, the teenager often requires little more inducement to give sex a try. "Teenager," we say? Today adolescent behavior, including sexual experiences, may be practiced as early as age nine or ten. The lure of being older entraps and overwhelms the child. And for many the ultimate passage into adulthood is symbolized by sexual activity.

We expect forty percent of all girls will become pregnant at least once before turning twenty. The fact is that for many girls pregnancy is not the awful event of yesteryears. In the short term, pregnancy can hold attractions, unrealistic though they may be. None of the consequences are easy but then again none of them seem hard: after all it happened to the girl next door and she lived through it.

Our study addresses efforts by the Y.W.C.A. in El Paso to render assistance to pregnant students. We herein report on our assessment of those efforts. As our report was being completed, the Y.W.C.A. shifted and greatly expanded its efforts on behalf of pregnant and parenting adolescents.

CHAPTER I

PERSPECTIVES ON THE PROBLEM

The National Scene

Few social problems have so rocked our modern society as the realization that approximately seventy-five percent of today's teenage girls are sexually active. Some social problems are of long standing and change little over the course of years. Not so teen-age sexuality. A generation ago most nice girls didn't; today a majority of nice girls do.

The problems resulting from teenage sexual activity are national in character and affect us all. Yet a 1985 report by the Alan Guttmacher Institute finds no "well-defined expression of political will" to avoid unintended adolescent pregnancy and childbearing. The Guttmacher Report continues:

> Political and religious leaders, particularly, appear divided over what their primary mission should be: the eradication or discouragement of sexual activity among young unmarried people, or the reduction of teen-age pregnancy through promotion of the use of contraceptives.

By the way of the media we find our teenagers caught in the interplay of real and simulated sex. The media encourage and reward sexual activities and instant gratification as ends in themselves. According to media-created myth, no one is responsible. Adults may be able to muddle through their private lives in spite of all the publicized sexual fantasies. But how about the impressionable eleven or twelve year old? Again an Alan Guttmacher Institute Report:

> American teenagers seem to have inherited the worst of all possible worlds regarding their exposure to messages about sex: movies, music, radio and TV tell them that sex is romantic, exciting, titillating; premarital sex and cohabitation are visible ways of life among the adults they see and hear about; their own parents' friends are likely to be divorced or separated but involved in sexual relationships. Yet, at the same time, young people get the message good girls should say no. Almost nothing that they see or hear about sex informs them about contraception or the importance of avoiding pregnancy. For example, they are more likely to hear about abortions than about contraception in the daily TV soap opera. Such messages lead to an ambivalence about sex that stifles communication and exposes young people to increased risk of pregnancy, out-of-wedlock birth and abortion.

In the last fifteen years premarital sex has increased at an alarming rate. The following national estimates demonstrate this increase:

Estimates of the Percent Engaging in Premarital Sex[1]

	1971	1976	1979	1985
Age	%	%	%	%
15	14	19	23	26
16	21	29	38	40+
17	26	43	49	50+
18	40	51	57	65
19	46	60	69	70+

The Alan Guttmacher Institute informs us that over a million girls in the United States became pregnant last year and even more will become pregnant this year. It is estimated that seventy-five percent of these pregnancies are unintentional. The consequences of an adolescent

---

[1]Various Sources

pregnancy are often tragic both in the short and in the long term. A terrified and unbelieving girl; parents and relatives in shock; the strong likelihood the girl will drop out of school; the prospect of a hasty marriage with practically no chance of success; problems with the baby especially when pre-natal care is delayed; facing the issue of abortion; the need for public support; the better than forty percent chance of a second pregnancy within two years, and the prospect that the girl's own daughters will also become pregnant in their teens.

It comes as no surprise that the teens are troubled times. An insight into teenhood comes from skimming book titles under "Adolescence" in the El Paso Public Library:

Teenage Tyranny

Growing up with Sex: a Guide for the Early Teens

How to Live through Junior High School

Rites of Passage: Adolescence in America

What about Me: the Adolescent

The Teenage Survival Guide

What to Do till the Psychiatrist comes: a Hand Book for the Parents of Teen-Agers

¿Que me esta pasando?

On Becoming a Woman

Una edad crucial

Runaways and Non-Runaways in an American Suburb

Why am I so Miserable if these are the Best Years of My Life?

The Successful Teen-Age Girl

What's Happening to My Body?

Vivienne: the Life and Suicide of an Adolescent Girl

It Won't Happen to Me: Teenagers Talk about Pregnancy

Pregnant Too Soon

Mom, I'm Pregnant

Unplanned Parenthood: the Social Consequences of Teenage Childbearing

Not My Daughter: Facing up to Pregnancy

Kids Having Kids: the Unwed Teenage Parent

We Never Had any Trouble Before

Making Friends with Yourself and Other Strangers

The Teenage Survival Book

The Age of Sensation

You and Your Feelings

How to get it Together when your Parents are Coming Apart

La nueva moral de los jovenes de hoy

Growing into Love

Is this Kid Crazy?

Coping with Teenage Depression[1]

The National Organization on Adolescent Pregnancy and Parenting, Incorporated, has produced the following summary of the problems brought on by teenage pregnancy and childbearing.

* Educational Consequences for Young Men and Women

  - Among teenage women, pregnancy is the most frequently reported reason for leaving school.

  - Mothers who give birth before age 18 are only half as likely to graduate from high school as those who delay parenting.

---

[1]Also see Appendix C

- Adolescent fathers are 40 percent less likely to graduate from high school than those who delay parenting.

- Studies are indicating that children of teen parents achieve less academically.

* Family Dysfunction:

- Almost half of the teenage mothers who gave birth in 1980 were unmarried.

- Teenagers who marry to legitimate a pregnancy experience a high incidence of marital disruption. (Some studies have reported divorce rates as high as 75 percent within 5 years.) Chances are high that a teenage mother will spend some time as a single parent.

- Girls who begin childbearing in their teen years tend to have larger families.

- There are indications that child abuse and neglect are higher among families which began with a teen pregnancy.

* Serious Economic Consequences:

- Women who had their first baby as a teenager have lower status occupations, accumulate less work experience, receive lower hourly wages, and earn less annually.

- At any given point in time, 60 percent of children born to teens out-of-wedlock, who lived and were not adopted, receive welfare.

- Seventy-five percent of those who give birth will require some form of public subsidy at some time.

- More than half the welfare (Aid to Families with Dependent Children - AFDC) budget goes to women who had their first baby during the teen years.

- Seventy-one percent of all mothers under 30 who receive AFDC have their first baby during their teen years.

- No evidence supports, nor does any disprove, the hypothesis that welfare encourages teens to become pregnant.

* High Health Costs:

- The maternal death rate from complications of pregnancy and delivery is 60 percent higher for women under 15 than for women in their early 20's.

- Pregnant teenagers are more likely to suffer from prenatal

complications such as toxemia, anemia, and prolonged, dangerous labor, primarily due to poor prenatal care and nutrition.

- Infants born to teenagers experience a far higher incidence of prematurity, low birth weight, physical disorders, infant mortality and mental retardation than those born to mothers over age 20.

- Repeat pregnancy rates range from 18-25 percent at 1 year and 30-50 percent at 2 years.

Even this summary of problems doesn't tell all. Problems associated with teenage pregnancy are neither confined nor discrete. We find mother abuse, social diseases, a damaged self-image, and a future constrained by social, economic and educational limitations. Furthermore, there is small comfort in realizing that approximately 20 percent of the nation's children are being reared by teenagers and the percentage will increase. Two-thirds of these mothers have not completed high school and one quarter of them are currently receiving AFDC payments. Of families headed by women aged 14-25 with children under six years of age (families in which the mother was frequently a teen at first birth), two-thirds are living in poverty.

Since education is a focus of this study, what more do we know about education issues? We are finding an increasing tendency not only for girls to remain in school during pregnancy but to return to school following delivery. Between 1968 and 1979 white teenagers stay in school rose by 22 percent and black teenagers continuing their education rose by 25 percent. Currently six in ten 18 year old mothers and four in ten 19 year old mothers have not completed high school.

A young mother without a high school diploma, work experience or vocational skills will have an extremely difficult time trying to enter

the labor force. Child care is hard to come by, as are flexible hours and part-time work with sufficient compensation to support a family.

People who should know better, some educators included, feel that little or no support or special consideration should be given to students who become pregnant. A major problem with such reasoning is that to refuse support to these girls is to punish both mothers and their babies. Educators sometimes reason that to give support to such girls only encourages others to become pregnant. It is even suggested, against the facts, that girls become pregnant as a means of obtaining public handouts. We can only wonder how many fifteen year-olds harbor dreams of going on welfare.

At the same time recent evidence has forced us to question whether most girls are innocent of desires to become pregnant. Contemporary estimates are that three of every four pregnancies are unintended. But it may be that more girls are drawn to pregnancy and childbearing than we suspect. Pregnancy makes a dramatic change in the lives of girls who find their everyday lives somehow lacking.

Whatever might motivate some girls to welcome pregnancy, we can not turn our backs on them. Yet among girls pregnancy continues to be the number one reason for school drop-out.

School people may argue that schools can't do everything. Why should schools be pulled into resolving social issues? Such an argument misses a critical point: schools are the only institutions outside the family that all youngsters are required to attend. Additionally, what schools are to teach and what services they perform must, in some degree, change as time and circumstances change. Europe's tradition-bound public

schools have not hesitated to get into sex education. To paraphrase a president, if not in the family and in the schools then where and how can youngsters learn the things they need to know about sex?

How can we account for the dramatic increase in sexual activity among young people? The answers are not simple and the evidence is subject to different interpretations.

1. Fifty years ago most girls did not mature sexually until they were fifteen or older. Today that sexual maturity may occur at eleven or twelve years of age.

2. Indifferent to the social consequences, advertisements, television programs, singing groups, the film industry and magazines portray sex as easy, natural, and fun. Brooke Shields posed nude at the age of ten and a few years later was made into a sex symbol. Ms. Shields is Success. There is hardly a single major American magazine that hasn't run at least one feature story on the Shields girl. Sex, the media inform us, is something to experience and the sooner the better.

3. When sex education is taught in our schools it is so tepid as to have only moderate success. The trail of myths that are associated with sexual activity and the consequences has barely been scratched. Boys as well as girls, and sometimes their parents, are ignorant of the methods likely to ward off pregnancy.

4. Peer pressure to engage in sex is impelling. The notion is loose that "everyone is doing it." Girls are conformers.

5. If a girl's relation with her parents - or school - aren't working out, one way to get attention is to become pregnant. Thus girls

who become pregnant may do so to comform or to rebel. We have long known that youngsters who have unhappy home lives seek understanding and love elsewhere: this often leads to teenage love affairs. The quest is happiness. The expectation often is that sex will lead to marriage and eternal bliss.

6. Girls who are poor are far more likely to become pregnant. The Alan Guttmacher Institute points out, along with others, that proportionately we have more pregnant girls living below the poverty line than any other developed nation.

7. The problem can be made worse by girls falling into a number of bad options - ones that hardly existed a generation ago. These include drugs, running away, marriage at an early age, and suicide. We learn that pregnant adolescents are seven times more likely to attempt suicide than their non-pregnant peers.

Texas

Texas has much to gain by being better informed about preventive programs and ways to assist the pregnant and child-bearing adolescent. One out of nine Texas girls age 15 to 19 will become pregnant this year. This compares to one in ten nationally. (See Table 1)

Texas is now first in pregnancies of females aged 14 or under. In fact our state has about the same number of pregnancies among girls 14 and under as Illinois and Pennsylvania combined. Yet Texas has a population of 15 million while Illinois and Pennsylvania have a combined population of over 23 million. Since 1966 there has been an 86 percent increase in Texas in the number of births to girls under fifteen. When

adjustments are made for population differences, Texas is rated third among the fifty states for pregnancies among 15-19 year olds.

Fortunately a basic state report exists to assist Texans concerned with the pregnant and parenting adolescent: the Texas Legislature funded this report The Select Committee on Teenage Pregnancy, with then State Representative Mary Polk chairing the committee which produced this landmark work. When the document was published in 1982, Texans were presented with an overview of the problems and ten recommendations for action.

The committee writes about teenage sexuality in Texas:

> There were over two million teenagers 13 to 19 in Texas in 1980, and almost 1.5 million in the 15 to 19 year old age group alone.....
>
> By age 19, eight in ten males and seven in ten females have experienced intercourse. A 1979 survey of unmarried teenage women revealed that 49 percent of them used no contraceptive method at first intercourse, and an additional 18 percent reported using withdrawal - an ineffective method at best. When asked how consistently they practiced contraception, 27 percent of the sexually active teenage women said "never." Thirty-nine percent of these women said they sometimes used contraception and 34 percent said they always used a method, including withdrawal.
>
> It is not surprising then that one in nine Texas girls between the ages of 15 and 19 became pregnant in 1980, or 92,295 in all. Texas has the fifth highest teenage pregnancy rate in the nation.....
>
> For the unwed mother with no family to help care for a child while she works, or seeks work (although Title XX does provide some day care services for working AFDC mothers), freeing herself of the welfare system is not an easy matter. For the unwed teenage mother the problem is compounded since she needs time to acquire the skills and experience to compete successfully in the job market. The welfare system

as it presently exists does not provide sufficient funds to support the teen through this necessary transition period.

Consequently, unemployment among Texas teenage women is extremely high. Bureau of Labor Statistics indicate that in September 1981, 18.8 percent of teenagers between the ages of 16 and 19 were unemployed. Unemployment among teenage women was even higher - 25.8 percent. For white teenage women the rate was 22.8, and for black women the unemployment rate was 44.5 - the highest unemployment rate of any group in the State.

Since the income eligibility standard for Aid to Families with Dependent Children is so low in Texas - 75 percent of a minimum need level established in 1969 - it is difficult for the AFDC recipient to enter the job market without losing public assistance benefits, even when the employment is insufficient to support the family. The average monthly payment to a family of four is $140, approximately $34 per recipient. This is one of the lowest assistance payments in the nation. When all forms of assistance are combined (AFDC, Food Stamps, Medicaid, Child Day Care) the average family of four receives $334 a month.

TABLE 1

LIVE BIRTHS TO TEENAGE MOTHERS

TEXAS, 1980

Mothers Age	Total Births	Unmarried Births	Number of Children							
			1	2	3	4	5	6	7	8+
Under 12	2	1	2							
12	26	25	26							
13	154	138	150	4						
14	816	557	780	36						
15	2,888	1,633	2,694	188	5	1				
16	5,954	2,703	5,295	612	42	5				
17	9,729	3,624	7,912	1,632	164	17	3			
18	13,502	4,034	9,943	2,982	500	67	9	1		
19	17,020	4,065	11,226	4,524	1,060	181	18	8	2	2
Total	50,091	16,780	38,028	9,978	1,771	271	30	9	2	2

Source: Texas Department of Health

Nationally, a kind of progress is being made. While more adolescents are sexually active than every before, the birthrate among this group has steadily declined. The peak year was 1957 where there were 96.3 births per thousand among 15 to 19 year-olds, compared to 1980 when the ratio dropped to 53 births per thousand.

The pill, legalized abortion, planned parenthood operations and education programs have all contributed to this decline. The glare of statistics and the fact that pregnant and childbearing youngsters are

choosing to be single parents - and open about it - have kept the issues in the public eye.

But there are, as our study indicates, ample areas in which poor and even tragic decisions can be made by traumatized youngsters. And there is always another twist or two to the problems. For example, there's a significant increase in the number of pregnancies among eleven to thirteen year olds. If that isn't enough we must anticipate the spread of AIDS into junior and senior high schools.

In their latest released study, the Alan Guttmacher Institute compares our pregnancy rates with those of other developed countries. We cannot be too proud of the results.

TABLE 2

Pregnancy Rates Per Thousand in the US and in Five other Nations

Pregnancy Rates	15-19	15-17	18-19
U.S. Total	96	62	144
U.S. White	83	51	129
England & Wales	45	27	75
France	43	19	79
Canada	44	28	68
Sweden	35	20	59
Netherlands	14	7	25

Source: Alan Guttmacher Institute

"U.S. Total" includes white and blacks. The Institute comments:

> What is more, some of the other countries studied also have minority populations that appear to have higher than average teenage reproductive rates (e.g., Caribbean and Asian women in England), so that it would not be appropriate to compare white U.S. rates with rates for the total adolescent population in those countries.

Until the summer of 1985, most of the support for the pregnant

teenager for El Paso students[1] centered on the School-Age Parent Center (SPC). Described in its essentials, the SPC represents a set of alternative programs directed at offering pregnant students support and educational services, on a voluntary basis, at a separate facility. Serving the El Paso Independent School District since 1974, the SPC offers a limited variety of courses, all for credit, normally for one semester to school girls who are pregnant or who have just delivered. Typically a girl attends the center for one semester and then returns to her home school in the district. At the present time the SPC functions only during the normal school year.

With the cooperation of the Y.W.C.A., a day care facility was inaugurated at the SPC in the 1977/78 school year. Supported by the Department of Human Services, the Y.W.C.A. staff added counseling, a family day car home system and referral services to their activities. Most recently the Y.W.C.A. has been given responsibility in managing an expanded version of Project Redirection. (Project Redirection is only indirectly included in this study.)

What surprises is the realization that the arrangements already largely exist to educate and counsel students on avoiding pregnancy and to assure that girls who do become pregnant at least continue their schooling. Any additional costs will be relatively modest. The schools and the counselors and the students are there. But some school people will not take on the challenge until they are better educated about the problem and the issues. In most cases a major task of reeducating junior

---

[1] Ysleta ISD, which as a separate program for pregnant students, also operates in the city of El Paso.

and senior high school professional and classified staff will be required. We will discuss this challenge in greater detail in our last chapter.

Reports, research documents and recommendations often don't become out-dated because conditions remain unchanged since no effort is mounted to implement them. We become insensitive to the tragic messages conveyed in such studies. The first shocking reports on sexual activity among adolescents accomplished little except to set the stage for decreased shock when succeeding reports came off the press.

Reports don't make changes; people do. So many needs compete for limited resources that words and deeds rarely connect. The possible future advent of AIDS in the public schools may alter the "words and no deeds" formula or bring us to terrible consequences. We find no way to reassure school people that teenagers will curtail their sexual activities - as will older and wiser people - because of the specter of AIDS. In fact without an effective vaccination or cure, AIDS might invade the classroom on such a scale as to alter our educational plans and require costly outlays of additional funds for medical-educational services.

In the next chapter the research is reviewed and exemplary programs examined. An important aspect of this study is to highlight programs, organizational arrangements and research recommendations that might benefit El Paso.

CHAPTER II

THE SETTING

A Profile of El Paso

El Paso is a city with more than its share of socio-economic problems. As a border city it mixes ample numbers of poor Hispanics and Anglos. With a population of approximately 500,000, official figures indicate that 25 percent of its people live below the poverty line even when undocumented aliens are not included. The two cultures - and the use of two languages - create an uneasy truce in which Hispanics (both Mexican-Americans and Mexican Nationals) seek employment thus assuring a constant source of cheap labor. The federal minimum wage does not always prevail. Unemployment is put officially at 11.1 percent (October, 1985), but some believe it to be closer to 50 percent. Generally, wages are 25 to 35 percent lower than in more unionized parts of the nation.

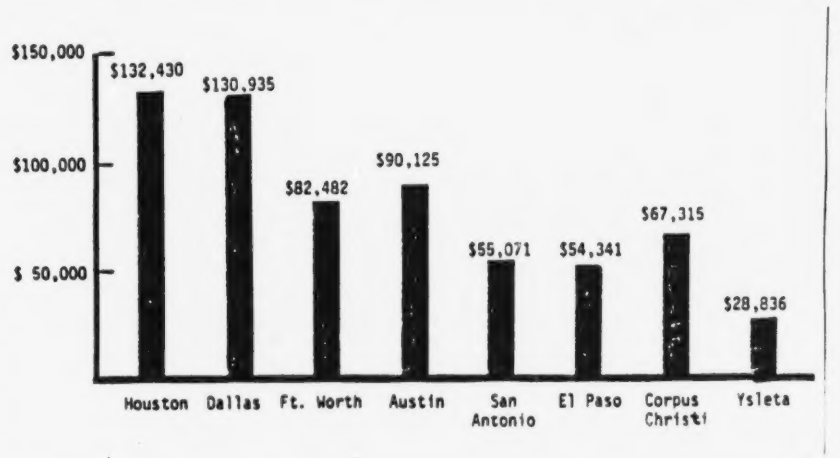
The city also has a large transient military population. Thus we find four sizeable and different social groups in El Paso: the military, "Anglos," Mexican-Americans and undocumented aliens.

The border fosters massive illegal activities in both directions. Goods and materials are smuggled into the interior of Mexico while people, drugs, and cash are smuggled into the United States.

El Paso is a relatively poor city. Table 3 is from El Paso Independent School District Statistical Report for 1981 and shows how El Paso compares to other cities in Texas in terms of property values.

TABLE 3

WEALTH: PROPERTY VALUE PER PUBLIC SCHOOL AVERAGE DAILY ATTENDANCE



Source: El Paso I.S.D. "A STATISTICAL REPORT" 1982[1]

In spite of El Paso's problems, the city is by no means the most active area for fertility rates and live births. Generally, poverty and adolescent pregnancy go hand-in-hand. Tables 4 and 5 show El Paso's relative standing in Texas by total numbers and by ethnicity. El Paso is ranked lowest in fertility rates for girls 15 to 19. Table 5 shows both our black and hispanic 15 to 19 year olds to rank lowest in fertility births per thousand while our "white" girls rank about in the middle.

---

[1]This 1981 comparison reflects the setting for the SPC. Economic conditions in Texas today are rapidly changing owing in part to a recent plunge in the market price for oil.

TABLE 4

FERTILITY RATES AND LIVE BIRTH FOR 15-19 YEAR OLDS
AND LIVE BIRTH TO WOMEN UNDER 15, BY HSA
TEXAS 1980

	Health Service Areas	Female Population 15-19	Live Births to Women 15-19	Fertility[1] Rate 15-19	Live Births to Women Under 15
1.	Panhandle Amarillo	17,484	1,448	83	10
2.	South Planes Lubbock	17,882	1,519	85	23
3.	West Texas El Paso	26,671	1,589	60	11
4.	Tri-Region Abilene	31,186	2,403	77	30
5.	Area 5 Irving	154,502	10,724	69	281
6.	Central Texas Austin	64,920	4,227	65	88
7.	Northeast Texas Marshall	37,989	2,639	70	44
8.	South Texas Kingsville	68,791	5,161	75	87
9.	Camino Real San Antonio	69,534	4,653	67	110
10.	Greater East Texas Beaumont	31,031	2,173	70	44
11.	Houston- Galveston	159,156	11,025	69	254
12.	Permian Basin Midland	16,892	1,532	91	16

Source: Texas Department of Health

---

[1]Fertility rate: Live births/1000, rounded to nearest whole number.

TABLE 5

FERTILITY RATES FOR TEXAS FEMALES AGE 15-19
BY ETHNICITY AND HEALTH SERVICE AREA
TEXAS 1980

	% Total Population 15-19 White	Fertility: Births per 1000	% Total Population 15-19 Black	Fertility: Births per 1000	% Total Population 15-19 Hispanic	Fertility: Births per 1000
1. Panhandle Amarillo	80.7	66	4.0	129	15.0	157
2. South Plains Lubbock	64.0	45	6.8	177	29.0	152
3. West Texas El Paso	29.5	52	3.6	86	66.9	62
4. Tri-Region Abilene	79.8	61	5.3	129	14.8	145
5. Area 5 Irving	75.0	49	15.0	135	9.6	122
6. Central Texas Austin	70.0	45	14.0	118	15.0	109
7. Northeast Texas Marshall	76.0	55	21.0	111	2.5	162
8. South Texas	29.0	53	2.4	97	68.5	84
9. Camino Real San Antonio	42.6	42	5.8	82	51.7	86
10. Greater East Texas Beaumont	73.0	56	23.0	108	3.9	108
11. Houston-Galveston	62.9	47	19.9	105	17.0	110
12. Permian Basin Midland	66.0	65	5.0	137	29.0	140

Source: Texas Department of Health, Department of Vital Statistics, 1984

Note: Fertility rates have been rounded to the nearest whole numbers.

The trend in live births to all 15 to 19 year olds and live births to unmarried 15 to 19 year olds is found in Table 5. We see an increase in total births from 1972 to 1984. Also, we note the number of births to unmarried girls doubled from 1972 to 1984.

The Alan Guttmacher Institute has estimated that nationally 40 percent more girls become pregnant than actually give birth. Because El Paso is a border city such national estimates are reduced to sheer guesses. While abortions are illegal in Mexico, accessibility and inexpensive medical services may well tempt pregnant girls to Juarez for an abortion.

On the other hand, the fertility rate per 1000 Hispanics in El Paso is remarkably low when compared to other Texas health service areas. This may indicate that traditional values are maintained longer in border towns than in the Texas interior. This in turn suggests that, as traditions erode and the economy does not improve, El Paso's fertility rate might rise considerably.

TABLE 6

EL PASO BIRTHS TO TEENAGERS, 1972-1984

Year	Unmarried 12-19 Years Old	Total Births 12-19 Years Old
1972	331	1,584
1976	417	1,718
1980	434	1,521
1984	649	1,875

Source: Texas Department of Public Health

Note: Upon becoming pregnant it appears that a high percent of pregnant girls marry.

We earlier indicated that El Paso Independent School District

established the School-Age Parent Center in 1974. The center is housed in a former school building on Doniphan Drive. Girls are free to decide whether or not to attend the center while they await the birth of their babies. The eligibility requirements for admission to the SPC:

> doctor's certification of pregnancy;
> resident of El Paso I.S.D.
> not more than 21 years of age, and
> not yet a high school graduate.

The typical pregnant girl who opts to use the SPC spends one or at the most two semesters in attendance while having her child. She is then expected to return to her "home" school and, if she meets requirements, graduates.

Students enrolling at the center have increased over the years. With close to 2000 teenagers becoming pregnant each year in El Paso County, not all of them apply for the SPC or for the special program in the Ysleta I.S.D. Some girls register for the SPC and don't appear or drop out after a short stay. For others abortion becomes the solution.

While home high schools give credit for courses taught at the Center, offerings at the SPC are limited. However, small class size and warm and informal atmosphere give most attending girls a renewed sense of worth and a positive attitude about school.

The school has a small teaching staff, a head teacher and a counselor. Specialists from the community who can supplement the programs by presentations are invited in. These specialists typically discuss health and medical issues and various community support services.

One persistent problem has to do with girls transferring back to

their home schools. They do not always feel wanted and find they are expected to conform to the standard attendance and tardy rules even though they must care for their babies and at times arrange and appear for medical checkups. Girls report that such inflexible attitudes on the part of some school people discourage their continuing to graduation.

In 1977, with funding from CETA, the Department of Human Services and the Mervyn's Foundation, the Child Care Program was begun under the direction of the Y.W.C.A. A Day Care Program began, again with Y.W.C.A. direction, in 1983. From its inception this program was designed to (1) help girls stay in school and (2) provide a training and guidance forum for student mothers. In the fall of 1982 the Y.W.C.A. expanded its activities to include counseling, a referral service and group supporting services.

Frequent news and feature articles have demonstrated the plight of pregnant adolescents, yet hardly more than a fraction of these students are being served in El Paso. In a partial response to this problem of reaching more girls, a project called "The Helping Fair" was launched in the fall of 1984. Sponsored by El Paso Community College, the Fair was planned around the themes of education, health and support services. The one-day activity attracted over 2500 community members. Now an annual event, the fair was expanded in 1985 and has become a four-day event.

This study addresses specific and defined aspects of the work of the Y.W.C.A. in conjunction with the School-Age Parent Center. Schoolcraft Consultants have culled the national literature for practical (and when possible, research-supported) ideas to recommend to the Y.W.C.A. and to

the SPC.

Finally, Project Redirection, a national Ford Foundation undertaking, came to El Paso in September 1984. This program calls for pairing pregnant teenagers with community volunteer "mentors." Volunteers are trained and then paired. Not only do these volunteers provide support but they also assist their charges in a variety of ways including making appointments related to health, education and employment. Recently this program was greatly expanded and we will shortly discuss it in more detail.

The Proposal

In mid-April 1983 El Paso Young Women's Christian Association officials Mary Beth Alderman and Anne L.M. Hernandez met with Ronald Jackson, of Schoolcraft Consultants to develop a study of Y.W.C.A. programs dealing with pregnant and parenting students. The study was to focus on Y.W.C.A. programs and services being conducted or about to be introduced at the School-Age Parent Center in El Paso, Texas. The SPC is a unit within the El Paso Independent School District. The study was to involve the Y.W.C.A., the El Paso Independent School District and the Department of Human Services. Several questions concerning the Y.W.C.A. programs were reviewed with the following emerging as central to the study.

1) To what extent are present and contemplated services meeting the needs of pregnant students and student mothers?

2) What programs and services, according to national research, appear to be of greatest value to these students? and,

3) Are recorded episodes of child abuse reduced

among students who attend the School-Age Parent Center?

Thus on August 1, 1983, Schoolcraft Consultants submitted to Y.W.C.A. officials and to a special advisory committee a proposal that, with minor modifications, was approved. Five questions are asked. Three focus on the Y.W.C.A.'s performance in areas where the Y.W.C.A. has expanded its programs and services. One question asks if there are more or fewer child abuse episodes on the part of students at the School-Age Parent Center. A final question requires a comparison between girls who complete and those who don't complete the Center's program.

The treatment given these questions in this study is descriptive and if possible analytical. Schoolcraft Consultants made it clear at the onset that the study would deal in relationships and attributes among variables rather than causal inferences. Schoolcraft Consultants also pointed out that adolescent mothers have traditionally represented a poor group from which to obtain a high number of responses in follow-up surveys.

Schoolcraft Consultants agreed to review the relevant national literature with special emphasis on evaluation and trends. To this end approximately one hundred documents and books were studied and contact was made with over fifty agencies and individuals throughout the United States.

Limited funds precluded travel and intensive long-term observations. The work was carried out by questionnaire, periodic meetings with the appropriate officials, and the tabulation of data collected from El Paso's eight district high schools. Programs were observed as time permitted.

Program and policy changes in the course of the study - especially regarding counseling - were monitored by Schoolcraft staff.

A questionnaire was designed which in content closely followed similar models used elsewhere. The major sections of the questionnaire are as follows:

1. "How are things going?" (Dealing largely with feelings about self and relationships to others.)

2. "My situation" (Mostly about living arrangements and viewpoints on specific programs).

3. "Where my baby and I get support" (Describing sources of financial and other support).

4. "My plans" (Reviewing education status and expectations).

5. "My feelings about the School-Age Parent Center" (Critiqueing SPC and Y.W.C.A. programs).

6. "Helping others in the future" (Suggestions for SPC-Y.W.C.A. program improvement and expansion).

Y.W.C.A. staff undertook to obtain responses to the questionnaire by telephone. A few girls who visited the SPC were interviewed face-to-face. The girls all understood that their names would not be revealed. Data were also collected first hand from the School-Age Parent Center, Project Redirection, the Department of Human Services, various city, county, and state offices and the University of Texas at El Paso.

A calendar and time lines were established. The calendar included dates for six advisory committee meetings at which progress reports would be presented by Schoolcraft Consultants. These progress reports would include: (1) a review of the general literature and research, (2) a review of the results of the questionnaires and counseling reports, (3) the results of an investigation into episodes of child abuse and (4) a

review of tentative recommendations.

In the course of this study two changes were made. One took place at midpoint in the study and the other as the study was being completed.

In the fall of 1984 the decision was made to increase and more sharply focus on the counseling activities at the SPC. For this purpose three groups of girls were formed, each meeting for approximately two hours each week. While these sessions were informal and there was a good deal of give and take discussion, each group followed a planned curriculum. The Y.W.C.A., for example, counseled the married girls and emphasized life planning. The youngest group of SPC students had counseling sessions with the regular SPC counselor. Project Redirection took responsibility for the middle group of students.

The second change: as this study neared completion new funding was provided to expand Project Redirection to identify and serve up to one thousand pregnant adolescents by September 1, 1986. Funded by the Department of Human Services - and supported by other state agencies - this renewed effort will involve all nine El Paso County School Districts. By using volunteer "mentors" (community women as models), the following programs and services are planned:

health services from prenatal to well baby care;
support to continue in public schools at least until graduation;
job and vocational training;
child care support;
therapeutic treatment as needed for "teens and their families";
emergency housing as needed (25 girls), and
transportation support.

The executive director of this program is presently located in El Paso's Y.W.C.A. In addition to the school systems joining together, several local public and private institutions will work with the Y.W.C.A.

in providing medical, health and educational services.

These recent developments came before our evaluation - and assumes that the Project Redirection model, along with school district collaboration - represent the most feasible way to proceed. However, our study represents the first comprehensive effort to collect and interpret data and we can expect many of the study recommendations to be incorporated into the expanded Project Redirection and SPC programs. Our data may also be more useful in designing programs for the five-district collaborative about to be formed in the county.

We now turn to a review of the national literature dealing with teenagers and pregnancy. This review will help us gain a better sense of the state of the art. At the same time we will look for proven and emerging practices that might be considered for El Paso.

CHAPTER III

WHAT RESEARCH TELLS US

Practical Uses of the Literature

Three objectives were uppermost in our thinking as we reviewed the literature: first, we would review the literature which examines comprehensive approaches to providing programs and services to pregnant students; second, we would report on comprehensive programs and services being provided jointly by public schools and other agencies; and, third, we would assemble ideas on programs and services that could be useful in strengthening the School-Age Parent Center and the Y.W.C.A. services in El Paso.

We have rigorously distilled research and other written materials so as to report only on matters of concern and value to El Paso. A visit was also made to New Futures School and Project Redirection in Albuquerque, New Mexico.

While we report on child abuse no great effort has been made to include literature on child abuse and neglect. We were asked simply to investigate any relationship between the work of the Y.W.C.A. and the School-Age Parent Center and incidences of child abuse. In our chapter on results we do review certain data on child abuse.

Clearly the topic of teenage pregnancy has come out of the closet and today is the subject of both popular and esoteric articles. One result of this attention is an urge to produce figures dealing with the

scale of the problem. Thus, national estimates are made of the number of annual pregnancies, child abuse episodes and the number of girls receiving help. We also guess at why girls become pregnant, (the girls themselves are often not clear about this), and we speculate about the fathers and what we might provide for them. We even have an estimate of the number of pregnancies avoided in 1975 because of contraceptives: 680,000.

The fifteen summaries that follow have been carefully selected to meet our objectives. We complete this chapter with observations about the limitations and the uses of the material reviewed.

General Programs

1. A report published in 1982 funded by the Administration for Children, Youth and Families, Research On Adolescent Pregnancy, reviewed work done from about 1970 to 1980. Among the conclusions of interest to us:

> several studies reported that when girls have an opportunity to see counselors, they tend to remain or re-enroll in school;
>
> In New York City special schools for pregnant girls were positively viewed by girls - but results in terms of school retention were "less than encouraging;"
>
> a study in Oregon concludes that "comprehensive programs with education as a major focus helps to keep young women in school and obtain a high school diploma;" and,
>
> when teen-age mothers attend a program designed to meet their needs, according to a study conducted by Virginia Bennett, teenagers (a) tended to stay in school, and (b) tended to have children who "developed better" than those girls who did not attend such a special program. Bennett also found that among the girls who attended special programs there were fewer repeat pregnancies and fewer episodes of child abuse

and neglect.

2. For over fifteen years the Mott Foundation has been involved in teen-age pregnancy matters. A four-year evaluation program of the foundation's programs "has resulted in a number of short-term findings we feel are significant" and include:

> teens that participate in the program stay in school and achieve at grade level or better;
>
> the self esteem of those who participate in the program was increased;
>
> repeat pregnancy was reduced;
>
> students who live with parents, when compared with those who lived alone, were more likely to remain in school, to graduate, to obtain jobs and to avoid welfare. However, even with those living with their parents, forty-three percent were on welfare five years after leaving school, compared with sixty-five percent of those who lived alone; and,
>
> consistent with other findings, in a number of other studies, the Mott study found that greater knowledge of parenting skills leads to fewer repeat pregnancies, longer participation in school and a greater likelihood of graduation.

The programs and services that produced these results included: support groups, follow-up, home visits, child care, counseling, family services, outreach and referral.

Dr. Anita M. Mitchell, who directs the foundation's evaluation team, found standardized tests to be of little use. Accordingly she has been designing her own evaluation instruments.

3. The Alan Guttmacher Institute is a name well known to those who care about the status of pregnant students in this country. In 1981 the Institute published the FACT BOOK ON TEENAGE PREGNANCY. In this landmark work by Jay Dryfoos and Nancy Bourque-Scholl, an overview

of the teen-age parent was presented. Their findings support other research profiles: (1) when a baby is born to a girl under nineteen years old, the girl is unlikely to finish high school; (2) the girl is likely to come from a low income group (in fact, the lower the income, the earlier the pregnancy), and (3) the younger the mother, the greater the possibility of an infant with a "lower" I.Q.

Of particular interest in this report were the concerns of students after becoming pregnant as contrasted with the views of the girls' parents.

	Girls	Parents
Restricted social activity	93%	71%
Friction at home	23%	36%
Excessive responsibility	13%	4%
Major schooling problems	10%	68%

Major schooling problems include drop-out. In this area the differences between girls and their parents might suggest a problem in girl-parent relationships

4. In 1981 the results of two national studies were brought together and analyzed by Melvin Zelnik, John Kanter and Kathleen Ford, all of Johns Hopkins University. The study, SEX AND PREGNANCY IN ADOLESCENCE, published in 1981, found the authors in despair over how to obtain valid data. For example, certain of their survey questions for their first study (in 1971) were reworded for their second (in 1976).

SEX AND PREGNANCY IN ADOLESCENCE does contain useful evidence that the higher the educational levels of the parents of pregnant and child-bearing teen-agers, the more stable, mature and ambitious is the outlook of those teen-ages.

Part of a chapter in SEX AND PREGNANCY IN ADOLESCENCE focuses on family structure and stability, "familism" and family and friends. One conslusion: "that intrafamily cordiality is hard to maintain and diminishes with increasing parental education, ranging form 60 percent for those whose parents had an elementary education down to 42 percent for those whose parents were college graduates. Regarding family and friends, measured by similarity in their viewpoints, the data are "ambiguous."

5. A comprehensive school-based program is proposed by Tena and Richard St. Pierre in the May/June 1982 issues of HEALTH EDUCATION. Their model is based upon the following:

Goals for the Overall Comprehensive Program:

provide a continuous system;
enhance self esteem and encourage development of personal identity and self confidence;
help girls in the adjustment of pregnancy in relations to family, peers, and self;
promote a positive orientation toward future;
encourage continuation of education;
provide medical care for mother and child;
provide nutrition education;
provide and encourage contraception;
educate on topics of conception, fetal development and birth;
examine community social services;
promote a positive attitude toward parenthood;
facilitate the development of eventual independence;
provide education in the areas of infant care, parenting skills, and developmental expectations;
follow up on girls and their babies as they leave the program to assess their progress and needs; and,
educate parents, school personnel, and community concerning the magnitude of the problem and the help needed.

The St. Pierres continue:

> The core of any systematic support system should be a school-based support group lead by a well quali-

fied, sensitive, caring individual. Two other components of the total system include medical services and infant and child care services (see Figure 1). Although all three components of the program need to function in combination, the school-based support group plays a key role in the overall success or failure of a total comprehensive program for pregnant adolescents.

One advantage of having the program school-based is that school attendance has been shown to be associated with delay in subsequent pregnancy. The girl who remains in school is less likely to become pregnant again because there is less opportunity, greater motivation, and reduced likelihood of marriage. Also, the girl who does not become pregnant again will find it easier to stay in school. The program should address the four major areas of need which have the following components.

The model they propose:

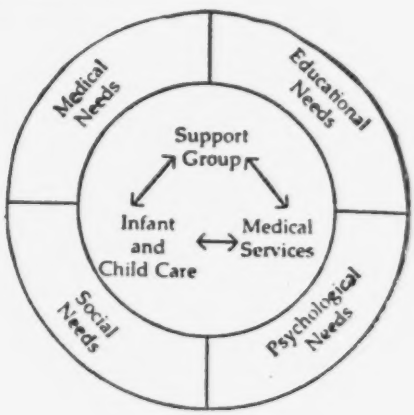


Figure 1

Conceptual model for a school-based adolescent pregnancy program

A major emphasis is made of support group sessions which they feel should continue after the teen-ager leaves school. They write:

Groups should be no larger than ten in order to be conducive to discussion. All members would use the same medical and child care services.

A key factor in making this program a success is selection of the right group leader. It is important

> that this person be knowledgeable in several areas including the adolescent stage of development, available community resources, and the psychological and physical processes of pregnancy. It is even more important, however, that this person possess warmth, acceptance, understanding, and sensitivity toward these girls. In this way she can gain their trust which will help the girls accept the support and information she is offering them.
>
> School personnel should refer pregnant girls to the group leader as soon as pregnancy is discovered. The sooner they are included in the program the faster comprehensive care can be provided.

The authors also sense the need to move the support group concept to wider audiences:

> In addition, it is important that parents, school personnel, and community be made aware that they can contribute to the adolescent's self image by accepting her. Part of the program should include workshops designed to acquaint people with the pregnant teen's dilemma in hopes of changing negative attitudes and also to provide full information concerning the program and its goals. This might help the pregnant adolescent function in school and community without the constant feeling of condemnation.
>
> With a more positive attitude toward self created through feelings of acceptance by significant people in her life, each girl will then be more motivated to undertake the necessary tasks presented in the sessions dealing with more practical matters at hand.

6. An article of considerable insight, "Evaluation of Programs for Adolescents," written by Dr. James F. Jekel, sifted the history of teenage pregnancy programs in search of unresolved issues. Written for BIRTH DEFECTS: Original Article Series, in 1981, the article should be required reading for anyone with an interest in the topic. We will only highlight some of his observations. He presents us with four clear failures: failure to reach the target group;

failure to provide services; failure to provide adequate services, and a failure of theory. In his concern about theory he ruminates over the possibility that more pregnancies may be wanted than we realize and thus centering educational programs on prevention may neglect an important part of the problem.

Jekel feels the arrangements for program delivery are less important than "the quality and coordination of services." Programs, he continues, should be comprehensive and "extra support services" are critical. He regards long term services as highly desirable. On the issue of including putative fathers he finds that studies have shown that they generally continue their relationship with the mother.

Making good use of the limited evidence, Jekel raises several issues for thought. He questions programs for fathers since rarely are they in the picture for a long time. Program quality is considered by the author more important than the setting. The issue of a "hothouse" effect of bringing services to these youngsters is raised: will girls become incapable of functioning independently when they are on their own? (Dr. Jekel can find no support for this concern.)

His concluding comments focus on the need to know more about how adolescents think and develop values. And in a final novel note, Jekel, who is a physician, informs us that second and third pregnancies can result in "high prenatal risks" associated with birth defects. Thus efforts should be mounted to prevent subsequent pregnancies.

Finally he judged only fifty percent of the 1128 communities offering services to adolescents to be comprehensive (1976 data) and thus providing educational, social and medical services to these youngsters. Above all other articles reviewed for this study, Jekel's work defines the state of the art regarding programs for our population.

7. In WOMEN AND HEALTH, Drs. Nancy Aries and Lorraine V. Kierman undertook an examination of the "common assumption" that comprehensive programs have a "greater impact" than more specialized programs. Since only one comprehensive program - the Crittenton Day Program - and one specialized (medical) program are studied, the findings are limited. The authors of this Boston-based study suggest that a girl's needs should be taken into account for "goodness of fit" to a program. Aries and Kierman acknowledge that girls who entered the Crittention (comprehensive) program were much more likely to continue and complete their educations. The authors conclude that "comprehensive programs should be developed whenever possible particularly because of their positive effect on high school completion....."

8. In a related study also published by WOMEN AND HEALTH, in 1981, Aries and Kierman turn around and challenge comprehensive models of services to adolescents. Drs. Nancy Aries and Lorraine Kierman conclude that girls who drop out of educational programs may also lose out on health and social services. Thus those who need on-going health care are viewed as "different populations with different needs." The authors conclude that different models should

continue to be tried. Meanwhile they continue to recommend comprehensive programs or "good coordination" between separate programs.

Program Specific

Our first section introduces issues and suggests general conceptual approaches. Here we look at the literature that is more definitive and practical.

9. A 1981 article published in AMERICAN EDUCATION, "School programs For Pregnant Teenagers," reviews the development of programs and services for pregnant students. The author, Duncan Helmrich, begins by pointing out how fragile are programs for teen-agers. He states that "prime movers" have often provided the impetus to mount appropriate programs. The use of older, abandoned schools for these students has not exactly encouraged enrollment of middle-class, suburban students. Helmrich is also critical of the academic programs which he terms "weak."

On the other hand, he reports that teachers are typically well qualified and dedicated. A generally positive feeling is generated by the school staff.

Exemplary programs should provide comprehensive programs from the onset of pregnancy to graduation or until the student drops out. These services should be provided to "all who want them regardless of how the student resolves her pregnancy."

Helmrich does find program offerings limited. For example, he feels more could be done to provide the option of evening classes, and he emphasizes the need for inservice programs for all staff who

in any way deal with pregnant students. Finally, the author encourages a comprehensive counselling program that would include working with drop-out issues, whether or not the baby should be kept, program options and attendance.

A 1972 evaluation of a special program in Detroit, Michigan, led to a body of information useful to the School-Age Parent Center Y.W.C.A. programs. The evaluation employed interviews with students, an examination of students records, a questionnaire to former students and staff conferences. Some 292 girls were involved.

These girls reported their reasons for not attending regular school as: safety, the need for a special program at delivery time, and privacy. The girls in the program said that they were pleased especially because of the small classes.

A questionnaire was sent to a hundred former students to which forty-five responded. Of those responding twenty-three percent graduated from CEG. Sixty percent of those who did not graduate from CEG returned to their base school but seventeen percent of these later dropped out. The two major reasons for dropping out of the base school: another pregnancy and lack of baby-sitting arrangements.

Slightly more than one half of the forty-five girls who responded were continuing their educations with about fifteen in college and ten in trade and night school.

Sixty-two percent were single, nineteen percent married and thirteen percent were separated. Twenty-three percent were

employed, thirty-four percent said that they were still in school (including their base high school), and twelve percent were receiving government aid. While seventy-three percent claimed to have no difficulty raising their babies, thirty-eight percent felt the need for a day care center. Almost sixty percent say they would use an infant group center because "the child could learn more," and mothers must work (92.6%). Thirty-eight percent of the mothers took care of their own baby.

When asked if they would use a counseling center, forty-eight percent (of the forty-five respondents) said no and thirty-eight percent said yes. As with the Cyesis program in Phoenix, most (eighty-six percent) considered the CEG to be of "very much help." Only two percent said the program was not helpful.

Homebound teachers were suggested for students unable to attend class. This proposal supports the recommendation made by Duncan Heimrich, that a variety of schooling arrangements should be available to these students.

Follow-up work with pregnant students is not easily undertaken. McCarthy started with 292 girls, sent questionnaires to 100 and received 45 responses.

10. The importance of the family is driven home in a study by Frank Furstenberg. Of 320 lower income, mostly Black girls, this study found that girls relied heavily on their families for financial support and that single girls - who fared better than those who

married - typically stayed in the home[1], in fact marriage was seen as offering little security. The babies of those girls who stayed within the extended family were also better off.

The nuclear family is viewed by the public as desirable while the extended family (in which most of these girls were found) has a negative image. Furstenberg recommends working with extended and nuclear families to render support to these girls and to help prevent unwanted pregnancies.

11. A 1981 evaluation of the Cyesis program in Phoenix, Arizona, for pregnant parenting teens lends further encouragement to the School-Age Parent Center - Y.W.C.A. configuration of programs and services. Of the 228 girls in attendance in 1980/81, 73.8 percent completed the school year and returned to their base school, or graduated (positive termination). At the same time their grade point average improved and the general assessment of the Cyesis program by students was highly positive.

Phoenix Cyesis 1980-81 Program: Positive Termination

Completed school year at Cyesis	92	40.9%
Completed graduation requirements at Cyesis	15	6.7%
Returned to home school	45	20.0%
Returned to home school and graduated	14	6.2%

This Phoenix program segregates pregnant and parenting teens and offers programs in: nutrition, human reproduction, pre-natal care, labor and delivery, post-partum care, infant care, child

---

[1]This finding appears to be at odds with the Mott Foundation study. Public welfare provisions may be the critical variable since they encourage separate households.

development, human relations, family planning, careers and consumerism. It appears that these eleven topics are offered in mini-course arrangements. Academic courses are also part of the fare. Group and individual counseling are available for parents and students - although this does not extend into a regular follow-up program. However, for this evaluation, a survey was made of former students as well as current students and staff.

Of the students surveyed, 93.8 percent thought that the Cyesis body of programs and services were "excellent or good." Seventy-nine percent found the courses "interesting." When asked whether the courses served all or most of their needs sixty percent agreed.

Student grade points improved from a high of 1.0 before entering and a low of 4.8 to 1.2 and 4.4 respectively upon leaving the facility.

While "most" students made academic progress they scored lower on the California Achievement Test than their fellow students in the district, the state and nationally. The average age of the students was sixteen and the youngest thirteen.

An assessment of the mini-courses by students and staff suggested that labor and delivery and family planning should have priority. An earlier evaluation had advised placing prenatal care and nutrition in the top slots.

Cyesis has not since replicated this comprehensive evaluation. However, programmatic similarities strongly suggest that our School-Age Parent Center - Y.W.C.A. people keep in touch with

Cycsis.

12. In 1983 Dr. Betty J. Kinsinger presented a pilot study on twelve adolescents at the School-Age Parent Center to the El Paso Independent School District. Working from the College of Nursing at the University of Texas at El Paso, Kinsinger offered these conclusions:

> Although generalizations cannot be made from this small, non-randomized sample and further revision of some of the measuring instruments is indicated, an analysis of data collected when the infants were neonates and 4-6 weeks old suggests that the School-Age Parent Center plays a vital role in assisting adolescent mothers to prepare and adapt to their new roles.....
>
> Most of the mothers depended upon their parents or husbands and family for assistance with parenting. There were interview data which suggested that role conflict and strain in the parent-student role was reduced by the presence of others in the household who could assist with child care responsibilities. The availability of child care services within the school was mentioned as having greatly alleviated worries about the infant by a few of the mothers.....
>
> The data from these 12 adolescent mothers and their infants suggest that the support these mothers receive from the School-Age Parent Center and their families are important factors in reducing role conflict and role strain. There is evidence, also, which suggests that a curriculum which includes content related to the special needs of adolescent mothers will influence attitudes regarding childbearing and child rearing.

13, Ann M. DeRose reviewed activities of the LAMP program (Lee Adolescent Mothers' Program) in California. Ms. DeRose recommends:

> assigning a big sister to new girls;
> developing a student handbook;
> using a personal information questionnaire (do you love pets, what do you do for fun, what trips have you taken, etc.);

designing a coat of arms, thinking of a personal motto;
making a scrapbook of magazine pictures related to her life;
writing an autobiography and keeping an "observation book;" and
writing a student newspaper.

14. In early 1985, Schoolcraft Consultants visited the New Futures School Incorporated (NFS) in Albuquerque, New Mexico. Established in 1970, the school has an exemplary program and is considered one of the finest schools of its kind. It is an alternative diploma-granting school of the Albuquerque Public Schools and is also supported by a non-profit, community-based organization, New Futures, Inc.

Funding for NFS is provided by the Albuquerque Public Schools, New Futures, Inc., the New Mexico Department of Human Services, the Manpower Demonstration Research Corporation, the Levi-Straus Foundation, the March of Dimes, the Albuquerque Community Foundation, a Community Development Block Grant, and individual group donations.

There are two departments of the New Futures School in-school program. The largest and oldest, now called the Perinatal Program serves the teen who enters during her pregnancy and remains until the end of the semester during which her child is born. The full range of educational and support services described further on this provided. The second department, called the Young Parents' Center, was begun in 1979. The center was designed to serve school-age mothers and fathers who, for identified reasons, cannot successfully participate in a regular school program in the year(s) following the

birth of their child(ren). Enrollment is limited, with students accepted only after a screening process. The Young Parents' Center, therefore, serves the highest of the high risk group. It, too, offers the full range of educational and support services. Clients may remain in this program as long as their needs exists if they are showing steady progress toward their diploma or GED. Individual contracts may be used to specify expectations and measures of progress.

During the 1983-84 school year over 425 adolescent mothers enrolled in New Futures School programs. The majority were Spanish-surnamed (53 percent), with Anglos (24 percent), Blacks (6 percent), and American Indians (15 percent) also included in the population. Thirty-three percent were school drop-outs; seventy-two percent of the YPC students had been school dropouts.

The education services of New Futures School include those academic classes which are required for high school graduation, special education classes, classes to prepare the young mother for caring for herself during pregnancy, vocational classes, and classes in parenting and child development. All of these courses carry credit toward graduation. All classes are taught by certified teachers. A student may take as few as two classes or as many as six classes. Classes are success-oriented and, in most cases, individually paced. Academic levels range from basic skills to college preparatory. Close contact is maintained with the student's previous school to facilitate smooth transitions to and from New Futures School. A GED preparatory class is offered for those

students for whom high school graduation seems an unreachable goal.

Health services include individual health counseling, group health instruction, and nutrition counseling. The health staff of four is directed by a registered nurse with a masters degree in Health Education. A health history is taken for each student when she enrolls. At this time the health staff determine whether the pregnant girl is receiving regular prenatal care. If she is not, she is immediately helped to select a health care provider and to begin receiving regular prenatal care. The health staff follow the young mother's health status throughout her pregnancy. A home visit is made in the two weeks following delivery. After the girl returns to school the nurses continue to be health resources for the young mother and her baby.

Counseling and social services are the third component of New Futures School's comprehensive services. At New Futures these services are provided by individuals with masters degrees in counseling. Several have had social work experience also. Each client is provided individual counseling whenever requested. Each NFS student is involved in group counseling once a week through one of her classes. In addition, weekly counseling groups are held for those young women who are considering relinquishing their children and, from time to time, for other students with special needs. A psychologist is available one morning a week to work with especially difficult cases.

Counselors encourage clients to consider their plans for supporting themselves and their child. Opportunities for

post-secondary education or technical training are made known through field trips, speakers, and literature. Vocational counseling is emphasized as clients near the end of their enrollment in New Futures.

Counselors must be knowledgeable about community resources. They make referrals for the young woman, her husband or boyfriend, or family members to appropriate social and governmental agencies. Referrals are followed up to ensure that the client contacts the designated agency and to learn if the needed service is received and understood. Counselors usually maintain personal communication with key individuals in agencies frequently utilized by NFS clients.

New Futures has a "Project Redirection" program, conducts outreach activities and is involved in prevention advising.

Project Redirection was initiated at New Futures School in the fall of 1983. Community volunteers, carefully selected and trained, work with pregnant or parenting teens on a one-to-one basis in their neighborhoods. The volunteers, called community women, assist teens to acquire life management skills and help them to formulate and achieve short-term and long-term goals. Project Redirection also includes a vocational component which serves clients of all New Futures programs with employment related workshops, field trips and seminars.

New Futures operates an outreach program which focuses on school-alienated youth in a low-income area of our community. This program, staffed by a bilingual nurse, sees students, primarily on a one-to-one basis, in their homes or neighborhoods. The nurse works

with the young parents regarding life management skills, health practices (particularly prenatal health care, family planning, and child care), and educational/vocational needs and opportunities.

NFS responds to requests from schools, churches, and community agencies for presentations on helping adolescents in understanding the realities and responsibilities of parenthood, and on leading teens to consider how a pregnancy would affect their individual lives. At times, New Futures students participate in these presentations. Fifteen hundred to two thousand teens are reached annually with these presentations.

New Futures, Inc. sponsors a training series for parents of pre-teens entitled "Family Talks." The program is designed to assist parents to become the primary sex educators of their children. Emphasis is on reinforcing a sense of self-worth.

NFS is also well-known for giving technical assistance, networking and developing program materials that have been distributed nationally and even internationally. New Futures School plays a leading role in the organization of the New Mexico Organization on Adolescent Pregnancy and Parenting, which includes nearly 300 members from throughout the state. New Futures staff assist a with community development activities resulting in the establishment of programs for pregnant and parenting adolescents in a number of other New Mexico communities.

New Futures conducted a six year evaluation of a sample (nine percent) of former students. In June, 1981 they did a follow-up telephone survey of a sample of former students who had attended the

school for at least 21 days sometime during the years 1974-1980. These students ranged in age from 16 to 24 years. One-quarter of them have moved away from Albuquerque. Forty-three percent of the sample are now married, and 33% of those who have married have divorced or separated. Thirty-four percent of the former students continue to live, or again live, in the households of relatives. Their report states:

> These former students appear to have a particularly high frequency of educational motivation and attainment considering their age and encumbrances as young mothers. Almost 3/4 of them have their high school diplomas, with almost all of the remainder having a GED or being in the process still of acquiring some skill training. One quarter of these young women have already gotten some vocational training or some college level education beyond the high school level. The accomplishment of their stated goals could carry them educationally much farther in the coming years.
>
> Financially, the two-paycheck households, and women living with husbands, are better off than their peers. Single parents still living in the households of relatives are financially the least well off. There are 12% of the sample who are currently receiving welfare aid.
>
> The former students we interviewed almost unanimously commended their NFS experience, many with tremendous enthusiasm. Classes on health care and parenting, together with staff acceptance of the students, received special comment from these.

The following material is an edited version of their final report.

Characteristics of the Student Sample

- There were 136 former students in the study. This was a 9% sample of the 6 year population at NFS.
- All the interviewees had attended NFS a minimum of 21 days. Attendants for less than 21 days were not interviewed.
- The average length of time the students had

attended was 5 1/2 months. The range of time of attendance was 2-13 months.

- 13 of these former students have attended the Young Parents Center (YPC).

- The ethnic breakdown of the sample closely parallels the ethnicity of the 1,500 students who have attended NFS in the past 6 years: 56% Spanish; 32% Anglo; 7% Black; 3% Indian; 2% Other.

- The present average age of the former students is 20 years old. The current ages of former students range from 16-24.

- 78% of the interviewees continue to live somewhere in Albuquerque, 11% live within New Mexico outside of Albuquerque, and 11% live elsewhere in the United States.

- Three-quarters of the student sample gave birth to their babies while they were enrolled at NFS; the remainder of the babies were born after the students had left the school.

Well-Being of the Student Sample

- 72% of the students said they were getting along well; 27% said they were doing O.K.; 1% said they were doing badly.

- 85% said they were in good health; 14% said they were "so-so"; 1% have serious health problems.

Education of the Student Sample

- 8% may be high school dropouts.

- 72% have a high school diploma; 10% have a GED; 12% are in some program.

- 26% attended or are attending post-high training or vocational school.

- 9 students are now enrolled in job training programs.

Economic Status

- 51% hold paid, part-time or full-time jobs.

- 47 women (68% of working women) work 30 or more

hours per week; 18 work fewer than 30 hours.

- One-half of the working women work at traditional women's dead end jobs: clerks, typists, secretaries, bookkeepers, waitresses, cashiers.

- 55 women (40%) are not working; half have "home responsibilities" and do not want to work.

- Single women and single parents living with relatives have the lowest incomes (usually below $8,000/year); single parents have only slightly higher incomes (almost all below $10,000/year) in 65% of the cases. There is a difference by year of attendance at NFS.

- Husbands are the primary source of support in 39% of the cases, 28% of the women support themselves and their children. More husbands are financial support in the earlier years; more young women are self-supporting in the later years.

- 12% of the sample (18 women) are now receiving welfare aid; an additional 11% (17 women) have received welfare aid sometime in the past.

- 19% of the sample presently receive Medicaid; 17% receive WIC or food stamps; 13% get Title XX-paid child care or share in household SSI checks.

- 60% of the women receive no benefits from state or federal programs.

As the Students see their Future

- 42% see themselves continuing to work for pay or to go back to work.

- 53% anticipate receiving additional training and education.

- 24% have plans for another baby.

- 23% anticipate getting married.

- 31% look forward to improving their homes and living quarters, or getting out on their own away from parents.

Feedback about NFS from Former Students

- 133 women gave positive responses about NFS; 2 gave

negative; 1 was undecided.

- The most valuable aspect of NFS for the students was (1) health care information, and (2) parenting information.

- 65% state they are happy with the way their life is going; 32% say they're O.K.; 3% are not happy.

- 120 mothers had kept their NFS babies; 113 were glad of that decision; 7 felt ambivalent; none were sorry.

- Of the 14 mothers who released their babies for adoption, 9 were glad they had made that decision; 4 were sorry; 1 student was ambivalent.

- The most frequently mentioned problem was financial (21%), with emotional problems (13%) and parenting problems (11%) next.

How Former Students Live

- 29 students were married at the time of their attendance at NFS; 29 more have married since; altogether 43% of the students have married so far; 19 students (14% of the total sample and 33% of the married sample) have been separated or divorced. Nine students have re-married. An additional 9 couples who lived together at the time of NFS attendance continue to live together unmarried.

- 34% of the sample live in households of relatives. (The recent graduates show a tendency to live more often in the households of relatives.)

- 12% are single parents living alone.

- 40% live with husbands in nuclear families.

- 65% live in 3 or 4-person households.

- 5 students have children living elsewhere with relatives.

Birth Control and Fecundity

- 55% of the sample have had no second pregnancy.

- In the course of the 6 years covered here, the average number of second and succeeding babies is fewer than 0.4 per mother (including deceased

children).

- 8 women have had abortions.

- 73% answered "yes" to "Do you use birth control regularly?"

- 48% use the pill; 18% use an I.U.D.; 10% are "abstaining;" 11% use "nothing."

Support

- Help with the baby(ies) comes predominantly from relatives of the young woman or from relatives of her partner (56%).

- Day care centers and nurseries provide 15% of the child care.

- Relatives and "in-laws" account for 45% of the parenting help.

- Husbands and boyfriends account for 34% of the parenting assistance to young mothers. (Husbands and boyfriends become more important as the sample grows older.)

- In an emergency, the young women would turn mostly to their own families (62%), and especially to "Mom."

- Only 38% would turn to their relatives for emotional support; 27% would turn to husbands or boyfriends.

- 38% have no contact with the father of the NFS baby.

15. Finally, the Texas House of Representatives funded a thoughtful and comprehensive report in 1982 entitled Select Committee on Teenage Pregnancy. Representative Mary Polk served as Chairperson. Excerpts from that report follow:

> There are several types of schoolbased services for pregnant adolescents and school-age parents across the nation. These range from the traditional homebound service (essentially a tutoring service) to special schools for pregnant girls that offer comprehensive medical, social, psychological and

educational services. Some programs include on-site nurseries. These provide day care after delivery, as well as a child development "laboratory" in which expectant parents and other students can learn about child care. In Texas, homebound programs constitute 32 percent of all services offered. Comprehensive programs operating on a separate special education campus constitute 41 percent of all available programs. Related services include school health services, 36 percent of the programs offer these; social work, 17 percent; counseling, 17 percent; psychological, 14 percent; and medical diagnostic services, 12 percent.....

Many programs remove the pregnant girl from her regular campus, and provide services in a single site setting, while others offer special supplemental services while keeping the teen at her regular school campus. Both models, on and off campus, have advantages and disadvantages. A recent study by the Rand Corporation concluded that programs which kept the pregnant teen in her regular school seemed to be somewhat more successful in preventing drop-out and academic failure before and after delivery. The most important ingredient for a successful program, however, was how well it fit into its environment. Some communities will not tolerate the presence of pregnant teenagers on school campuses, and a young woman in this situation is likely to experience a great deal of pressure from teachers and peers to drop out. Program coordinators across Texas expressed their belief that it is the exceptional student who can handle remaining in her regular school throughout pregnancy in Texas.....

Special schools for pregnant girls also have many advantages. They provide a supportive environment in which classes tailored to the special needs of this group of teenagers are offered. Young women can share their experiences with other girls in the same situation and they have access to counselors and teachers who are particularly attuned to their unique needs and problems. They can learn about reproduction and child development, family planning and parenting - subjects that few regular schools will offer. And, if a nursery is available, they have an opportunity for first hand experience with child care, as well as a place to put their child after delivery. When the academic curriculum offered by these programs is strong, they may also succeed in

preventing the teenager from losing academic credits during her pregnancy. By assuring that her academic program is disrupted as little as possible, the student may return to her home school after delivery and complete her education with her original classmates.

Once a teen delivers she is no longer eligible for special education services, and at the completion of the semester in which she delivers she must return to her regular school. The day care facilities that some programs provide continue to be available to the eligible mothers, since these are funded by private agencies such as the United Way, and other public funds. But few programs or communities do have day care services. The lack of affordable and reliable infant day care is probably the greatest cause of school drop-out following delivery.

The psychological adjustment a young parent must achieve when returning to a "normal" high school environment may also be particularly stressful. She will have few other students to share her experience and her concerns with. If she is fortunate enough to have an advocate or counselor on her home school campus, or continuing contact with the instructors at the special school, she may survive the transition, but it is rarely an easy one.....

The national average of repeat pregnancies among teenage mothers where no parenting programs exist is 44 percent. Where parenting programs exist the repeat pregnancy rate is 25 percent. The Austin Independent School District's Education for Parenthood program reports and 8.9 percent repeat pregnancy rate. New Lives, a comprehensive program for pregnant teenagers in the Ft. Worth Independent School District reports a repeat pregnancy rate of less than 7 percent among the 350 students they serve each year.....

Drop-out has also been significantly affected by these programs. When the AISD Education for Parenthood Program began in 1976, an estimated 60 percent of the mothers being served by the Teenage Parent Program were dropping out of school rather than returning to their home schools. That figure has been reduced to 15 percent. A New Lives evaluation found that over 80 percent of the students served in the program were still in school or had

graduated one year after leaving the program and returning to their home school.

Other findings in the New Lives evaluation were noteworthy. Within the first year of comprehensive services the birth weight of babies born to the students increased an average of two pounds. Also, less than seven percent of New Lives students had been reported to the Department of Human Resources for child abuse or neglect. Other school districts in Texas have exemplary school programs as well.

The ability of program planners to evaluate the success of their programs with regard to drop-out, pregnancy outcome, repeat pregnancies, contraceptive utilization, and parenting education varies greatly and is frequently hampered by the other institutions with which they work. Most school districts do not keep adequate records of the reasons for school drop-out, and some districts have no mechanism for following up on students who drop out of school. An example is the Houston Independent School District. There are several facilities for pregnant students in Houston, one of which has a comprehensive medical facility and day care center on-site at a vocational education campus. A young mother may bring her child to the center in the morning and return at the end of the school day to pick the child up - the only requirement for using the child care facility is that the mother must be attending school. However, communication with this program by the target schools is so sporadic that counselors rarely know whether or not the young mother did in fact attend school that day. Many similar problems face program evaluators across Texas. Frequently, baseline statistics cannot be obtained to enable evaluators to compare drop-out rates of mothers served in programs with drop-out of parents not served.....

Pregnancy and marriage are the most common causes of high school drop-out; eight out of ten adolescent mothers never complete high school. The association between educational attainment and future employment is well known, and failure to obtain a high school diploma is frequently the beginning of lifelong welfare dependence. The inability to find affordable child care is one of the primary reasons so many teens, particularly unwed teens, leave school after the delivery of the baby.

> Affordable, quality day care is in short supply across the nation. It is particularly difficult for low income women to find suitable child care. A national study indicated that in 1976 the U.S. had at least 7 million applicants for its 4 million subsidized day care openings. Most voluntary organizations, (83 percent), and most profit-making day care centers, (74 percent), will not accept children under two. This makes the problem of day care particularly difficult for the adolescent mother who may wish to return to school after delivery of her child or may need to enter the labor force to care for her new family. Of the 1.3 million children in the nation with teenage mothers only about 43,000 are enrolled in day care programs, in other words only 3 percent. Approximately 37 percent are being cared for by non-working mothers, relatives or babysitters, and the majority, (62 percent), are in need of day care services because the mother would like to return to school or work.
>
> In Texas there are an estimated 93,500 teen mothers currently caring for 110,500 children. If the national percentages apply to Texas teens as well, there are approximately 68,510 children in need of day care services to enable their young mothers to continue school or work. In 1980 there were a total of 17,101 licensed day care programs of all kinds in Texas. Few of these centers accept infants.....

Conclusions

Over one hundred studies and reports were reviewed for possible inclusion in this survey of literature. In addition, approximately fifty contacts were attempted by telephone or correspondence. A search was made for appropriate instruments to use, or adapt, for our needs. Our status questionnaire reflects the fruits of this search. Dr. Mark W. Rosa of the Center for Family Studies, Tempe, Arizona, offered valuable comments on a draft version of the status questionnaire. Dr. Earladeen Badeer, Chief Evaluator of the Charles Steward Mott Foundation pregnancy programs, shared several documents and instruments with us.

Excepting the work of the Mott Foundation, the evaluations and

instruments collected are of local design. Much of the questions presented in these forms cover the same issues. Our questionnaire is a composite of the better features and questions garnered from these sources.

A. These studies indicate that the more comprehensive the programs and services the greater the likelihood of indexes of "success" as exemplified by longer retention in school, high school graduation, fewer repeat pregnancies and fewer episodes of child abuse. One study furnishes evidence of enhanced personal self-esteem while two others credit comprehensive programs with increased interest in further education. The problem of obtaining a matching control group makes all conclusions tentative. Melvin Zelnik, et al, in Sex, Pregnancy and Adolescence by-pass the program matching issue and reports on the advantages of a high school and beyond education as correlated with later success. Thus Zelnik's research lends indirect support to any program that leads to longer retention in school.

What appear to be the critical elements of successful comprehensive programs? This question deserves study and at times requires an analysis of raw data (which may no longer be available!). In any event, here are the areas that make a difference according to the research we have reviewed: (1) extensive counseling available to students and their families; (2) keeping students in school; (3) focusing on practical programs such as how-to-do-it infant care courses; (4) supporting and giving encouragement to nuclear and extended family groups; and, (5) refusing to give up on students.

There are recommendations that counseling include: (1)

discussing options for the baby - including adoption (2) school attendance - helping with problems that make regular attendance difficult; and, (3) making efforts to keep youngsters in school. Counseling should be readily available from the earliest stages of prenancy through and beyond high school graduation (or drop out).

The Guttmacher Institute Study describes the concerns of parents of pregnant students. This in turn suggests that these parents may welcome counseling and such efforts appear to be profitable. There is fairly pervasive evidence (not all of it accounted for in this report) that the family - especially the girl's mother - is critically necessary in rendering support to the girl.

B. All pregnant teenagers should have access to and options for arrangements for continuing their educations such as evening classes, after school classes, regular school programs and homebound instruction.

C. Those teachers and staff who have any contact with pregnant girls should go through in-service training to assure a uniform (and compassionate) treatment of these students.

D. While much is made of comprehensive programs, the paramount issue is quality of services. At various points adolescents are likely to need one special program more than another. Thus the coordination of quality programs and services are more important than organizational patterns.

E. Because our proposal doesn't cover it, we do not report on the issue of prevention. Nevertheless we must note the importance given to prevention in scores of the studies we examined and the

recommendation that sex education begin in kindergarten and be carried through all the school years.

F. We must respect the uses of multifaceted structures such as New Futures School. With roots in the school system, the community, and in several agencies, New Futures is able to adopt and grow as needs indicate.

G. Resolution of organizational and scope issues appears to be important. Transportation problems, day care facilities and educational opportunities under various arrangements should be periodically reviewed to assure that needs are being met.

The conceptual model proposed by Tena and Richard St. Pierre may, more than the authors realize, argue for and support programs and services offered in conjunction with a school-based program. They correctly view support as going beyond the bounds of the school's teachers and staff. Services being performed by private organizations - such as the Y.W.C.A. - would enhance and make more likely the development of organic programs based on need.

CHAPTER IV

THE RESULTS

Introduction

In mid-April 1982 Young Women's Christian Association officials discussed with Schoolcraft Consultants the need to assess the performance of the Y.W.C.A.'s newly expanded program responsibilities in El Paso to support pregnant and parenting school students. Interest in the assessment was shared by the Y.W.C.A. with the School-Age Parent Center and the local offices of the Texas Department of Human Services.

An advisory committee was formed and met six times in the course of the study. Schoolcraft Consultants conducted a first round of visits and made contacts with state regional and national organizations concerned with teenagers and pregnancy.

The proposal submitted by Schoolcraft Consultants to the Y.W.C.A. officials and its Advisory Committee made it clear that the study results must be viewed as limited since many variables beyond the control of the Y.W.C.A. intervene to allow for unequivocal attribution. Indeed, early in the study it became apparent that often the activities of the Y.W.C.A., the School-Age Parent Center, and Project Redirection and the public school could not be separated. (The Family Day Care Home program, which operates away from the School-Age Parent Center and is designed for students needing day nursery facilities, is somewhat more researchable as a separate program.)

The primary data collected encompassed the years 1979 to 1985. Three instruments, based upon modifications of instruments used elsewhere, were designed to collect the necessary data. Two were questionnaires and the third dealt with counseling. These instruments:

> How are things going? A general questionnaire designed for those who attended the School-Age Parent Center. The questionnaire consists of ninety items in twenty-five categories.
>
> Here's a way to help our program. A questionnaire for students using the Family Day Care Home facilities. There are seventeen items.

Data on several variables were called on the 731 girls enrolled in grades 9 to 12 in School-Age Parent programs from 1979 to 1985. This information was gathered from the registrars in each of the eight high schools involved. Additional information was obtained from El Paso's Public evening school, from SPC records and from the public school Department of Evaluation, Research and Planning. The local Department of Human Services provided data on child abuse. The Department ran the names and birth dates of all 731 SPC girls through their computerized list of reported episodes of child abuse to allow us to compare SPC and non-SPC populations.

Approximately twenty officials were interviewed and testimonials were taken from several former SPC students and school counselors.

As indicated earlier "The Helping Fair" was inaugurated by El Paso Community College. The fair, for young pregnant and child-bearing girls was held in 1984 and again in 1985. It is now considered a permanent El Paso event. In 1985 sixty-one public and private agencies

participated.

A visit was made to New Futures School, and Project Redirection, in Albuquerque, New Mexico. So much for the major activities undertaken in the course of this study.

Table 7 presents an overview of the students and schools involved. Irvin, Austin, and Andress appear to supply about one half of all the students who attend the SPC.

In order to compare students who were involved in the Y.W.C.A. programs with those who were not, we termed the former as the "82-85 group" (post treatment) and the latter (pre-treatment) the "79-82 group."

TABLE 7

HIGH SCHOOL STUDENTS WHO ATTENDED OR ATTEND

THE SCHOOL-AGE PARENT CENTER, 1979-85

High School	High school Membership 1981-82	STUDENTS AT THE SCHOOL-AGE PARENT CENTER						
		79/80	80/81	81/82	82/83	83/84	84/85	1979-1985 Totals
Andress	1902	14	24	23	17	17	19	114
Austin	2095	17	20	14	37	21	17	126
Bowie	1574	16	13	13	24	7	17	90
Burgess	1559	11	5	10	12	7	11	56
Coronado	2107	7	15	10	15	8	16	71
El Paso	1548	12	10	8	6	5	12	53
Irvin	2482	22	21	28	17	23	18	129
Jefferson	1515	20	16	20	13	9	14	92
TOTALS	14,779	119	124	126	141	97	124	731

Notes: A. Girls counted once: In a few cases girls overlapped years.
B. Known cases of out-of-district girls who enroll in E.P.I.S.D. high school in order to enter the SPC amount to twenty-eight; there may be more. These girls as well as elementary and junior high school students are not included in this study.

This study was designed to find out how well the Y.W.C.A. programs

and services, associated with the SPC, were performing. Not included were elementary and junior high school students since these students were not part of Schoolcraft Consultant's study proposal. However, we did collect some data on these students which we feel deserves attention and we present it in Appendix A. We can report that the number of elementary and junior high school pregnant students attending SPC is increasing. From 1979 to 1982 there were forty-one while from 1982 to 1985 there were seventy-four. Thirty-six percent of the girls in grades eight and nine becoming pregnant and attending SPC are over-age in grade.

Graduation

The first question to be tested asked if the number of girls graduating from high school would increase after the introduction of the Y.W.C.A. programs. To this point no significant difference has been found. The most responsible conclusion to be made is that is simply too early to tell.

Of the 79-82 group we found 214 high school graduates with 32 "unknowns." (For the most part unknowns are those who have left El Paso.) The figures are not so clear for the 82-85 group since 111 girls in the program have not reached the point of graduation. We do know that 148 of the 82-85 group actually graduated (or passed the GED). The two groups come out the same once we adjust for unknowns (if we assume one half of the unknowns have or will graduate) and make the same determination concerning the 111 who still may graduate. Consequently, our adjusted figures are: 79-82 group, 230 graduates and the 82-85 group, 230 graduates. Thus, to the fall of 1985, our evidence does not show a greater number of girls graduating since the Y.W.C.A. programs were

expanded.

Counseling

The next question we raised was designed to examine the efficacy of the Y.W.C.A. counseling programs: "will counseling and other support services planned for girls who either complete or drop out of the SPC correlate with any improvement in the status of these girls?" Our data for this question derive in large part from the questionnaire supplemented by interviews with a number of people including former SPC students. A form was also prepared to record the frequency and types of counseling activities performed by the Y.W.C.A.

It would be useful to review the counseling program undertaken by the Y.W.C.A. From January 1984 through May of the same year, Y.W.C.A. staff conducted a total of 144 group and individual counseling sessions. The first month of counseling consisted of thirty separate sessions. May was the month of greatest activity with forty-eight counseling citations.

Counseling activities were a major part of the new programs established by the Y.W.C.A. and begun in January 1984. An objective of this program was to render support to SPC girls and to continue that support, as possible, by follow-up group counseling in home high schools.

Records of counseling activities were maintained by the Y.W.C.A. Information seeking was the most frequently cited need. In May 1984, for example, thirty-eight of the forty-eight citations related to information seeking. Home and personal problems were next in frequency. It was not unusual for girls to make telephone calls to the homes of Y.W.C.A. staff. On many occasions home visits were a necessary part of counseling.

Starting January 1984 group counseling sessions were conducted twice

weekly for new mothers on location at the SPC for two class periods each day. Average attendance each period was 10-12 students. Group counseling sessions were also conducted twice a month in the Andress High School area with attendance ranging from one to six students. A series of programs were presented to the groups with time given for discussion. Topics included:

Sex roles
"Love and Sexuality"
"What Characteristics would you like in a Man?"
A film presentation on birth control
"Teenage Birth Control: Why doesn't it Work?"
Communication skills
A discussion of values and attitudes (several sessions)
Abuse and neglect/Abuse vs. discipline
Child development/(Denver text) administered
Discussion and activities dealing with vocational/career choices

Such counseling activities can not be directly compared within any academic pre and post test procedure. Indirectly, by comparing grades and graduation information, we can in time obtain a global sense of the benefits of these counseling sessions.

In the fall of 1984 the Y.W.C.A. changed its counseling program to focus on the thirty-five married girls attending the SPC. A revised program plan was submitted to principal Betty Dodson by officials of the Y.W.C.A. The counseling program for these girls was derived from the Center of Population Options and is titled: "Life Planning Education." The Y.W.C.A. plan included units on self image, life planning, communication, decision-making and goal setting. There were two sessions a month for a total of two hours counseling for each girl. (Other girls attending the SPC were counseled by non-Y.W.C.A. staff.)

One factor, not a surprising one, that relates to graduation is connected to grade-point averages. Of those students indicated whose GPAs were between 75 and 80, 68 percent graduated, while those with GPAs of 80 and above, 74 percent graduated from high school. Thus "better" students had a slightly greater prospect - but not statistically significant - of graduating. Here is the breakdown:

	GPA 75-80		Above 80	
79/80	of 22 students	13 grads	of 21 students	16 grads
80/81	of 28 students	18 grads	of 17 students	12 grads
81/82	of 26 students	23 grads	of 15 students	13 grads
82/83	of 26 students	16 grads	of 15 students	11 grads
83/84	of 20 students	13 grads	of 20 students	15 grads*
84/85	of 17 students	12 grads	of 11 students	6 grads**
	(4 still in school)		*(2 still in school)	
			**(4 still in school)	

In reviewing the variables, no evidence pointed to more than slight differences between or among the groups that might shed light on the original question raised. The girls are remarkably alike. However, in time the Y.W.C.A. programs may become a factor in assuring that more girls complete the SPC-Y.W.C.A. programs and go on to graduate.

In further analysis we looked to see if any differences existed between the groups regarding attendance at the SPC. We found that a slightly greater drop-out rate among the 82-85 group with 27 percent not making it through the first five weeks compared to 20 percent for the 79-82 group. This may suggest a need for increased counseling during the critical first weeks of the SPC-Y.W.C.A. program. In any event, those who dropped out in the first five weeks made an important difference in the numbers who finally completed the SPC-Y.W.C.A. programs.

We next reviewed the grade point averages to see if any differences existed between the two groups. Once again as Table 8 shows, the groups

were virtually identical. The overall grade point average for the 79-82 group was 70.38 and for the 82-85 group 71.56.

TABLE 8

GRADE POINT AVERAGES
FOR THE 79-82 AND THE 82-85 GROUPS
BY YEARS AND BY SCHOOL

Schools	79/80	80/81	81/82	82/83	83/84	84/85
Andress	74.41	72.68	74.61	70.22	74.36	76.19
Austin	75.88	71.71	72.40	72.49	71.36	73.88
Bowie	72.04	72.16	68.57	66.69	68.34	77.12
Burgess	77.14	74.69	74.90	76.02	69.94	75.35
Coronado	75.18	74.01	74.42	73.32	72.39	73.72
El Paso	73.01	74.60	70.14	73.51	73.09	69.94
Irvin	69.98	75.23	69.87	67.89	63.06	65.31
Jefferson	70.74	73.51	72.39	69.13	71.55	72.36

Thus, as of the fall of 1984, the sum of counseling activities at the School-Age Parent Center had substantially increased when compared to past efforts. Y.W.C.A. staff have played a prominent role in these counseling arrangements.

In the future, Project Redirection will be assuming responsibility for counseling performed by the Y.W.C.A. The need for adequate counseling services is a key recommendation in this study.

To explore the impact of the Y.W.C.A. counseling programs required the design of a questionnaire. Using that instrument, we were able to inquire what problems confronted girls once they found out they were pregnant. From the 79 girls who responded we identified 42 distinct problems. We were able to categorize the problems and they are found in Table 9. Issues that the girls faced after delivery are given in Table 10. A common message is conveyed: pregnant girls must first

communicate their plight. After that their concerns are with health and financial issues. The issues shift, as we see in Table 10, after the baby arrives. At this point number one and number two issues become finance and employment.

We should consider for a moment how awesome these problems are for a girl who often is no more than fourteen or fifteen. When the girl enrolls in the School-Age Parent Center can she expect help and support. But at the onset of pregnancy she can feel terribly alone.

TABLE 9

"WHEN I FOUND OUT I WAS PREGNANT MY BIGGEST PROBLEMS WERE....."

	RANKINGS			
	79-82 Group		82-85 Group	
	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPC & H.S. GRADS
Telling my parents	1	1	1	1
Baby's health	2	-	2	4
Finances	3	2	-	3
Family relationships	4	3	-	-
Telling natural father and his parents	5	-	2	-
Personal health	-	4	-	-
Considering abortion	-	5	-	2
Completing high school	-	-	2	5

Cited once or twice: "telling relatives," "the future," "keeping the baby," "where to live" and "dating."

TABLE 10

"TODAY MY BIGGEST PROBLEMS ARE....."

	RANKINGS			
	79-82 GROUP		82-85 GROUP	
	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPC & H.S. GRADS
Employment/finances	1	1	2	1
Discipline of baby	2	2	-	-
General baby care	2	2	1	2
Baby's father/husband	2	3	-	-
Future	2	-	3	-
Family relationships	-	2	-	-
Second pregnancies	3	-	-	-
Interpersonal relationships	4	-	-	-
Baby's health	5	-	4	-
Loneliness	-	-	-	3
Completing high school	-	-	3	-

Cited once or twice: "child abuse," "stress," "in-law problems," and "transportation."

When we compare the 79-82 group with the 82-85 group do we find differences? It appears that the 82-85 group had fewer problems. But the issues with both groups can be broadly defined as finances, interpersonal relationships and baby care. It is interesting to note that second pregnancies do not appear to be a major issue. On the other hand, it is disappointing that matters relating to education do not have greater prominence as an issue.

There appears to be a clear recent improvement in status when we compare our two groups in Table 11. More girls in the 82-85 group are married, and have part-time and full-time jobs.

Some measure of future plans as an aspect of status are found in Table 12. Students were free to check as many categories as they felt applied. Both high school graduates and non-graduates in the 82-85 group show more ambition than do the 79-82 group. It is not easy to interpret

the relatively heavy preference shown for taking "life one day at a time." It could suggest that this group has learned to relax - or it could suggest a reluctance to face up to life: It may be a little of both. But the most significant change is seen in the increased interest in the 82-85 group regarding college graduation and in having a career.

TABLE 11

A COMPARISON OF THE TWO GROUPS
REGARDING FUTURE PLANS

"FIVE YEARS FROM NOW I PLAN TO....."	79-82 GROUP		82-85 GROUP	
	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPEC & H.S. GRADS
be a high school graduate	12	N/A	10	N/A
be a college graduate	-	5	6	13
be supported by a husband	6	5	9	10
have a career	2	9	12	13
take life one day at a time	1	6	11	17
TOTALS	21	25	48	53

Note: Students were told they could check more than one.

TABLE 12

"RIGHT NOW, MONEY FOR MY
BABY AND ME COMES FROM....."

	RANKED				
	79-82 Group		82-85 Group		
	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPC & H.S. GRADS	TOTALS
"the government"	1	2	2	6	11
"parents"	2	1	1	2	6
"husband"	3	4	3	1	11
"boyfriend"	4	3		5	12
"part-time work"	5	4		3	12
"other relatives"			4		4
"full-time work"				4	4

Notes:
A. Not mentioned or mentioned only once or twice: "savings," "work, but not steady."

B. Students could check more than one.

Several observations are in order. Given the relevance of the wide range of problems found in this and other similar studies, the need for counseling looms large. The challenge of designing preventive programs should be first on the counseling agenda. Next counselors should respond to the rise in pregnancies in the elementary and junior high schools. After that, counselors and school leaders must render special support to pregnant students to see them through high school graduation. For at least a year after graduation some agency should provide follow-up counseling.

Those who make decisions about the number and responsibilities and school placement of counselors must not lose sight of the pregnant girls who become potential school drop outs. Those school counselors who are given administrative chores by their principals need to spend their time giving the necessary help to pregnant and parenting students.

The challenges can also be met in part by several agencies, including the Y.W.C.A. and Project Redirection. Since the counseling needs are so broad, academic school counselors and other school leaders should welcome the support of a variety of counselors.

Another measure of status is found in our study of child abuse. Not a single case of child abuse was reported for girls who attended the Center and the Y.W.C.A. programs in the 1984-85 school year.

Recidivism is another factor in status. Repeat pregnancies do not enhance status. The figures we found for El Paso, while possibly not complete, give a far better picture than the national average. As a ratio, School-Age Parent Center-Y.W.C.A. student recidivism is one to

fifty-six while nationally approximately one teenager in four will have a second pregnancy within one year.

A review of the questionnaire section "How are things going?" gives evidence of differences between the 79-82 group and the 82-85 group. In items dealing with self image (2), relationships with the girl's father (7) and in socializing (8), the difference in favor of the 82-85 group is marked. There is other evidence to support improvement in the 82-85 group. Fewer of these girls view themselves as in a rut (3) and relationship with the girl's mother appears to be better (4).

Of considerable interest is the similarity in responses between 82-85 School-Age Parent Center non-high school graduates, graduates only and SPC H. S. graduates. For example, a girl's relationship with her mother and father, items four and seven on Table 13, show 82-85 School-Age Center completers, not high school graduates in a favorable light. The overall inference here is that School-Age Parent Center-Y.W.C.A. programs make the difference and not high school graduation.

TABLE 13

RESPONSES TO STATEMENTS ASSOCIATED WITH COUNSELING

Percent Responding "Yes"

	79-82 Group		82-85 Group			
	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPC & H.S. GRADS	79-82 AVG. 79-82 TOTAL	82-85 AVG. 82-85 TOTAL
1. I am busy most of the time	82.6	71.6	86.7	83.3	79.5	84.6
2. I feel pretty good about myself	56.5	71.6	93.3	87.5	64.1	89.7
3. I think I'm in a rut	34.4	47.1	26.7	34.8	41.0	30.8
4. My mother really understands me	43.4	64.7	60.0	66.7	53.8	61.5
5. An infant should be punished like anyone else	13.0	17.6	13.7	8.3	15.4	10.3
6. My baby is lots of fun	60.1	100.0	80.0	87.5	79.5	84.6
7. My father really understands me	17.4	47.1	66.7	45.8	30.7	53.9
8. I go out for fun once a week	17.4	23.3	46.7	45.8	20.5	46.2
9. I go out for fun once a month	60.1	52.9	60.0	45.8	59.0	51.3
10. I have more enemies than friends	8.7	11.8	6.7	4.2	10.3	5.1
11. I have friends but I don't see them	60.1	82.4	73.3	66.7	71.8	69.2
12. I plan to make more friends	65.2	82.4	73.3	87.5	74.4	82.1

Note: The chi square test reveals no item-by-item statistically significant difference between groups.

Little information is available regarding recidivism resulting in live births; it is apparent that our figures are incomplete since the ratio we obtain is one to 56 while the national average, over a twenty-four month span is about one to four repeat pregnancies.

Child Abuse

We next turned to the question of child abuse and asked: "do those who attend the School-Age Parent Center abuse or neglect their children more or less than those in the general population?" Child abuse has attracted national attention in recent years and, given the disintegration of the nuclear family and other social ills, may be on the increase. While most figures bearing on child abuse are imprecise, the results obtained in this study give evidence that the School-Age Parent Center and the School-Age Parent Center-Y.W.C.A. programs matriculate girls whose child abuse episodes fall far below the general El Paso population.

From 1979 to 1982 the School-Age Parent Center program involving 369 students had nine reported cases of child abuse, a ratio of one to forty-one. The 362 students enrolled in the School-Age Parent Center-Y.W.C.A. programs from 1982-1985 produced three reported child maltreatment cases for a ratio of one to 120! If we assume that thirty percent of El Paso's child abuse reports cited a 15 to 24-year-old childbearing female, we have a ratio for El Paso of one to twenty-three. (The procedures we followed to produce this population ratio are described in Appendix B.)

Our results once again:

1979-1982 SPC students "abuse report" ratio: one to 41

1982-1985 SPC-Y.W.C.A. students "abuse report" ratio: one to 120

1983 General population (females 15 to 24) "abuse report" ratio: one to 28

1979-1985 SPC & SPC-Y.W.C.A. "abuse report" average: one to 67

Thus the differences between each group are not only significant but dramatic. If by some alchemy all pregnant 15 to 24 year old women in El Paso were to undertake the School-Age Parent Center-Y.W.C.A. programs, the number of child abuse reports emanating from that group could potentially be reduced approximately one half.

Before further examining our results some background information may be useful to the reader. Nineteen-eighty-four saw a national upsurge in reported child abuse episodes. The National Committee for the Prevention of Child Abuse revealed that abuse reports increased by nineteen percent over 1983. Recent national information campaigns and news stories have dramatized the tragedy of child abuse and sensitized the nation to the plight of those children. The National Committee for the Prevention of Child Abuse in its latest report is convinced that we are dealing with only the tip of the child abuse iceberg. Some 450,000 cases were reported nationally in 1976, and an estimate of 1,273,000 was given for 1984, a 300 percent increase.

Figures on actual episodes of child abuse should not be dignified as more than educated guesses. The fact is we talk a good game but find documentation another matter. Our problems begin with a definition. One person's - expert or not - child abuse is not another's. Physicians often don't report maltreatment cases and when they do, they are kinder to the middle class than to the poorer class. Indeed, abuse is typically

laid at the doorstep of the poor. The discords of poverty seem to provide a highway to abuse as national overall evidence invariably suggests. But, better off families invariably escape our tallies and thus limit in another way our powers of estimation. Frank G. Bolton, who in 1980 wrote a minor classic in the field entitled The Pregnant Adolescent, dots his book with statistics and charts. Yet a chapter called "Adolescent Parenting and Child Maltreatment: Environments of Reciprocal High Risk" avoids all mention of statistics regarding child abuse.

For each major form of maltreatment, the national incidence rates (in 1979) for white children are much higher in families with incomes less that 15,000 dollars than in higher income families. However, abuse rates are approximately constant and are relatively low across income levels for non-white children. Slightly over forty-eight percent of reported maltreatment episodes concerned people receiving public assistance. The plight of the El Paso girl puts her right in this pattern: sixty-two percent of those who completed the questionnaire were receiving public assistance and virtually all are concerned with money and money related issues. Thus School-Age Parent Center-Y.W.C.A. clients conform to the national low economic status norm but part ways on reported cases of child abuse.

These results, so favorable to the School-Age Parent Center-Y.W.C.A. programs, were obtained in spite of a substantial increase in local abuse reports. In 1982 there were 1693 reports while in 1984 the figure rose to 2505, an increase of sixty-seven percent.

While the School-Age Parent Center-Y.W.C.A. record is remarkable,

it makes eminent sense to track to it for another two or three years to determine the reliability of the results. In the last academic year, 1984-85, not a single abuse episode is attributed to those who attended the School-Age Parent Center-Y.W.C.A. programs. For the moment, therefore, the most stable ratio is the six-year average of one to 67 - less than one half the general same-age female population ratio.

These School-Age Parent Center-Y.W.C.A. results are confirmed in several questionnaire responses:

Statement number 5

"An infant should be punished like anyone else" Yes (7); No (65)

Statement number 25h

"I feel well-informed about my baby's needs for discipline" Yes (46); No (6)

Statement number 17f

"For myself I feel I have had enough help with learning to enjoy my baby" Yes (39); No (10)

Day Care Form (Girls 1983-85 only)

"(The day care program) helped me feel I could take care of my baby." Yes (30); No (3)

Characteristics of School-Age Parent Center Students

The next task was to study the characteristics of selected variables to determine what if any differences exist between the students who attended the School-Age Parent Center. We can identify four categories of students. Those who:

Attend SPC but not completing the program and not graduating from high school.

Attend SPC but not completing the program but graduating from high school.

Completing SPC but not graduating from high school.

Completing SPC and graduating from high school.

As a general statement we find little difference between these categories and in comparing the 79-82 group with the 82-85 group. Only limited conclusions can be made concerning the latter group since it normally takes four years for ninth graders to graduate from high school. Thus many current School-Age Parent Center students will not be in the twelfth grade until 1986 or 1987. We can only urge that the appropriate data continue to be recorded to see what happens to students who remain potential high school graduates.

Several variables on which we collected data were unlikely to alter with the expansion of the day nursery program or with the introduction of counseling in the 1982-85 school years. For example, these variables have no effect upon student age-grade level upon entering the School-Age Parent Center. Here we show the percent of average students by year.

1979-80	24 girls out of	107	22.43%
1980-81	9 girls out of	108	8.33%
1981-82	24 girls out of	98	24.49%
1982-83	30 girls out of	117	25.64%
1983-84	22 girls out of	105	20.95%
1984-85	21 girls out of	90	23.33%

We discern no great differences between the two groups; the slight recent age increase is owing to an increase in girls who are older in the ninth grade. However, these older girls, to this point, are no more or less likely to graduate from high school.

Another variable not influenced by the introduction of the Y.W.C.A. program is the number of low income families as defined by enrollment in the federally-supported lunch program. These students, when compared to

those not on the federal program, are only slightly less likely to complete their high school education.

Place of birth does not appear to hold any special significance. The percentages stand thus for 1979 to 1985: we find 58.7 percent born in El Paso, 24.6 percent born in Texas and the U.S.A., 15.7 percent born in Mexico and one percent unknown. When the percentages are compared between the two groups, the results are virtually identical except for a 4.4 percent increase in Mexican born in the 82-85 group. Until we study this result for another two or three years it is premature to consider this slight increase as a trend.

Table 14 shows only slight differences between the 79-82 group, and the 82-85 group in variables associated with student grade levels. A six-year profile reveals no clear trends since it will take ninth graders still in school four or more years to graduate from high school. It appears that those who don't complete the School-Age Parent Center program are unlikely to graduate from high school since over a five year period only twenty-eight managed to do so. Yet graduation from the School-Age Parent Center is no assurance of a high school diploma: eighty-four in the 79-82 group who completed the School-Age Parent Center did not graduate while 159 went on to receive diplomas.

Thirty students completed the School-Age Parent Center but not high school. In 1979-80 there were fifty graduating from high schools also. Those completing the School-Age Parent Center only in 1982-84 numbered thirty-four, and those who are both School-Age Parent Center and high school graduates numbered forty-seven. Once again no difference is evident to this point.

TABLE 14

SPC GRADUATES AND NON-GRADUATES, BY ENTRY GRADE, AND HIGH SCHOOL GRADUATION

YEAR	SPC ENTRY GRADE	NOT COMPLETING SPC		COMPLETING SPC	
		NOT H.S. GRADS	H.S. GRADS	NOT H.S. GRADS	H.S. GRADS
79/80	9		2	10	1
	10	1	4	10	2
	11	2	4	10	17
	12	4	2		30
80/81	9			2	4
	10	3	1	13	6
	11	5		15	20
	12	1	4	1	24
81/82	9	6		7	2
	10	1		11	7
	11	4	3	5	22
	12		3		24
82/83	9	3		15	1
	10	10		8	16
	11	4	3	3	13
	12	2			26
83/84	9	3		12	2
	10	5	1	12	1
	11	7		5	18
	12	1		5	26
84/85	9	1		7	
	10	2		8	3
	11	6		9	3
	12	1	1	3	22

Note: A. "Unknowns" are not show

Table 15 presents variables related to "race." The predominant races are Hispanic and White[1], with Hispanics outnumbering Whites approximately three to one. Of the Hispanics, from 1979 to 1982, eighteen percent who enrolled in the School-Age Parent Center didn't complete the SPC. Whites did slightly worse with twenty-one percent not

---

[1]Note: It strikes us that "Caucasions" is a better exprssion than "Whites." We use Whites since data bases typically distinguish use of the term.

completing the School-Age Parent Center program. Of the Hispanics who completed the School-Age Parent Center from 1979-82, fifty-five percent went on to earn a high school diploma compared to forty-nine percent of Whites. We do find an improvement in both Hispanics and Whites in 1982-83 where fifty-nine percent of Hispanics and sixty percent of the Whites who are School-Age Parent Center graduates also graduate from high school. While the difference is not statistically significant, this favorable development bears watching. It is certainly good news to note that Hispanics and Whites are proportionately together when it comes to graduating from the School-Age Parent Center and then later from high school. The challenge is to see that an even greater number of those completing the School-Age Parent Center also earn a high school diploma.

TABLE 15

SPC GRADUATES AND NON-GRADUATES BY
RACE AND HIGH SCHOOL GRADUATION

		DID NOT COMPLETE SPC			COMPLETED SPC		
YEAR	RACE	NOT H.S. GRADS	H.S. GRADS	UNKNOWN	NOT H.S. GRADS	H.S. GRADS	UNKNOWN
79/80	3				1		
	4	5	11	2	18	40	6
	5	1			3	5	
	6	1	1		8	5	
80/81	3	1			1	2	1
	4	5	2	2	20	36	4
	5	3	3	1	10	16	1
	6						
81/82	3				1	5	
	4	9	3		14	38	1
	5	2	3	1	4	12	
	6				4		1
82/83	3	1				3	1
	4	13	2		21	43	8
	5	5	1		3	9	3
	6			1	2	1	
83/84	3	2			3	2	1
	4	11	1		26	30	6
	5	2			5	14	
	6	1				1	
84/85	3	1			1	2	1
	4	8	1	1	22	18	21
	5	1			3	8	1
	6				1		

Note: A. 3=Black; 4=Hispanic; 5=White; 6=Unknown

In this section we have looked at the following variables: age, grade level, year in the School-Age Parent Center, economic status as determined by federally supported lunch or not, place of birth and race. In other sections we examined grade point averages, recidivism and

responses to the questionnaire by the four categories of students we have identified. When we analyze the quantative data we find a general need to continue to collect data to prove out any trends toward improvements. To this point there is some evidence that more School-Age Parent Center-Y.W.C.A. graduates are completing high school. Not surprisingly we find students less likely to graduate from high school if they are on free lunch, above average age in grade, entering the School-Age Parent Center at the ninth grade (or earlier) and having slightly lower GPAs.

The final statement to be studied concerned "good or bad points" of Y.W.C.A. programs and services rendered to students enrolled in the School-Age Parent Center-Y.W.C.A. program. As work progressed it became apparent that there was no way to treat School-Age Parent Center and Y.W.C.A. activities separately. For example, to ask students to distinguish between counseling provided by the Y.W.C.A. and counseling done by the School-Age Parent Center was not reasonable. The prospect for making distinctions is improved in thinking about day care but can't alter the overall point that the Center and the Y.W.C.A. programs are inexorably linked. While this situation makes program distinctions difficult for research purposes, for students it is as it should be: students care only that they are helped and not about who provides what.

The questionnaire was one of the major instruments used to collect our data. A greater response to the questionnaire would have been desirable. However, when compared to similar studies, our 13.5 percent response was above the average.

We first study answers to some general, but vital, areas. Substantial differences exist between 79-82 and 82-85 responses when

both groups were asked how much help they received regarding seven support areas. These responses, found in Table 16, show the 82-85 group far more satisfied with help they received in all seven areas expect in "thinking about adoption." The most striking difference appears in the domain of "personal counseling." There is literally "no contest" between the 79-82 and 82-85 groups. The 82-85 non-high school graduates express the grades and degree of satisfaction with the information and assistance received.

Note that the seven issues, to a large extent, relate to counseling. The evidence here is that direct and indirect counseling has been of considerable help - and in 82-85 was adequately rendered.

Of the seventy-three students responding to the questionnaire statement: "I feel that the School-Age Parent Center-Y.W.C.A. programs were....." (Table 17) 80.8 percent characterized the programs as "good or excellent" and only two, less than three percent considered them "poor." A comparison between 79-82 and 82-85 indicates that 86.6 percent of the latter gave favorable ratings while in the former group the rating was 75 percent. The salient message is that the School-Age Parent Center programs have been appreciated and found useful by students.

TABLE 16

A COMPARISON OF THE TWO
GROUPS REGARDING GUIDANCE NEEDS

ITEM	"YES" RESPONSES RESPONSES EXPRESSED IN PERCENTAGES			
	79-82 Group		82-85 Group	
"For myself I feel I've had enough help with _____"	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPC & H.S. GRADS
Personal counseling	17	12	79	80
Family planning	30	35	86	76
Birth control	30	53	93	80
Sex education	30	53	93	68
Thinking about adoption	26	35	43	20
Learning to enjoy my child	48	59	100	72
Getting used to life as a mother	57	65	100	68

Note: A. Several girls in the 79-82 group indicated that they had acquired information from sources especially related to family planning and birth control.

These results are consistent with other data collected which, when taken together present a uniformly positive rating to School-Age Parent Center-Y.W.C.A. programs. We do find a few areas where improvements can be considered. From the nature of the problems girls bring with them when they enroll in the School-Age Parent Center-Y.W.C.A. programs and the problems they experience after having their babies (Table 17) the role of counseling must take center position. This counseling should

begin at the earliest possible moment - even before entering the School-Age Parent Center facility - and continue until after they graduate from high school. After the baby is born the problems most cited are:

employment/finances
baby care
the future
completing high school, and
loneliness

Also mentioned; family relationships, a second pregnancy, interpersonal relationships and disciplining the baby.

What improvements might be considered in the future? Student responses revealed twelve issues that the Y.W.C.A. should consider when addressing ways to strengthen their program. These are ranked in Table 18. The responses suggest satisfaction with the present programs. What is asked for is an extension of present programs - and the invention of new ones to assist and support girls when they leave the School-Age Parent Center-Y.W.C.A. The message is clear: practical help in gaining more education, in interpersonal relationships and in reaching for independence.

TABLE 17

STUDENT JUDGMENT OF THE
OVERALL SPC-Y.W.C.A PROGRAMS

"I feel that the SPC-YWCA programs were _____"	79-82 Group		82-85 Group		
	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPC & H.S. GRADS	TOTALS
POOR	1		1		2
SOME HELP	5	3	2	2	12
GOOD	10	8	4	11	33
EXCELLENT	4	6	7	9	26
				TOTAL	73

TABLE 18

STUDENT RESPONSES TO WAYS TO IMPROVE
THE SPC-Y.W.C.A. PROGRAMS

	RANKING			
	79-82 Group		82-85 Group	
	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPC & H.S. GRADS
More help continuing my education.	1	3		2
More courses to help me understand myself.	2	2	1	3
More help in planning the future.	2	1	4	2
Giving support when girls return to home high school.	2	3		1
More help with family relationships.	3	1		3
More help in obtaining a job.	4	4		
More emphasis on practical courses such as child care.		2		
Informal courses for the baby's father.		2	3	2
More help with child's father.		2		
Harder academic courses.			2	1
More social activities.			3	

Two remarkable tables, 19 and 20, taken from other other studies, reflect the need for an educational - counseling program that the Y.W.C.A., possibly in consort with others, should consider. The first table reflects some aspects of teenage value systems. This table suggests several areas that need to be addressed directly with students.

The results are comprehensive but not otherwise different from those we obtained from girls. Table 20 shows dramatically how school-age mothers, their parents and school people differ in judging the various consequences of early child-bearing. Teenagers attach no importance to "limits" on post-high school education while educators are much concerned about this issue. Educators may need counseling since they see the child-bearing student as embarrassed in class while these students in fact report no such feelings. Parents and school people join together in concern about problems completing high school while the teenager expresses only slight interest in graduation as an issue. Clearly there's much to be learned by students, parents and educators.

TABLE 19

WHAT ARE THE MOST IMPORTANT GOALS OF TEENAGERS

Goals/Values of Male Respondents (n=333)

Rank	Goal/Value	Percent Who Ranked Goal Very Important	Somewhat Important
1	Getting a job I enjoy	86	99
2	Preparing for my future	86	99
3	Making it on my own	74	97
4	Getting good grades	73	98
5	Making money	72	96
6	Getting along with my family	68	93
7	Expressing the creative side of me	59	88
8	Having sex	55	91
9	Making new friends	53	95
10	Traveling to new places	52	90
11	Making the world a better place	48	92
12	Having fun	47	83
13	Having children someday	43	81
14	Being popular	38	80
15	Living by my religion	25	65
16	Getting married	24	70
17	Getting high and hanging out	14	46

Goals/Values of Female Respondents (n=667)

Rank	Goal/Value	Percent Who Ranked Goal Very Important	Somewhat Important
1	Getting a job I enjoy	86	99
2	Preparing for my future	84	99
3	Making it on my own	75	97
4	Getting good grades	73	98
5	Getting along with my family	67	95
6	Making money	62	95
7	Traveling to new places	55	92
8	Expressing the creative side of me	54	91
9	Making new friends	52	93
10	Having children someday	46	84
11	Making the world a better place	45	88
12	Having fun	43	81
13	Having sex	27	68
14	Getting married	26	73
15	Living by my religion	25	63
16	Being popular	22	71
17	Getting high and hanging out	13	43

Source: S. Ross, The Youth Values Project, New York, Washington, D.C., 1979

TABLE 20

CONSEQUENCES OF TEENAGE PREGNANCY AS PERCEIVED BY TEENAGE MOTHERS, THEIR PARENTS AND SCHOOL OFFICIALS IN WASHINGTON, D.C. METROPOLITAN AREA, 1978

Consequences	Percent mentioning selected consequences of school-age pregnancy and mother hood		
	School-age mothers aged 18 or under	Parents of school-age mothers	School Representatives
N=	30	28	14
School absenteeism during pregnancy	7	7	29
Embarrassment attending classes during pregnancy	0	4	36
Constriction of social activities	93	71	100
Delay or prevention of graduation	10	68	79
Greater difficulty in finding employment	7	7	79
Greater likelihood of using public assistance	3	4	86
Limited post-high school education	0	7	50
Improved lifestyle	13	0	0
Increased parent-daughter friction	27	36	64
Extensive burdens and responsibilities	13	4	29

Source: Gail Hasselbach Henderson, "Consequences of School-Age Pregnancy and Motherhood," Family Relations, April 1980, Table 1, P. 187

Students using the Y.W.C.A. Infant Center at the SPC expressed almost one hundred percent approval with the support and assistance rendered them. The same level of approval was given to the School-Age Parent Day Home Program. For example, of the eighteen responding who used the SPC-Y.W.C.A. Infant Center, fifteen felt it made the difference between continuing in school or dropping out. In addition to the high regard for these services indicated by respondents, appreciation was expressed for information gained about the care of babies. All but one respondent gave favorable replies when asked if she had been taught much about her baby and helped to "feel I could take care of my baby." When asked to give "any further ideas about these programs," girls generally indicated that the programs were of great help. One critical comment: the facility should take "fewer babies." Another girl wrote:

> "To me that school was o.k. I really liked it a lot. It really helped me out. There was not enough counseling. I think that them having the nursery was a good idea because most of the girls would drop out because they did not have babysitters. I also think that they would not give us enough food. Well this is how I feel about the School-Age Parent Center program. I would recommend it to any pregnant girl."

We can conclude that the infant centers perform a vital function in keeping some girls in school and in giving pertinent instruction and guidance to their users.

Table 21 shows an overwhelming sense of satisfaction by students with the information given regarding nine baby-rearing categories. This is especially meaningful since the questions were asked of girls who had either graduated or dropped out of school (or otherwise terminated their high school programs) and were on their own. The information given girls

regarding baby-rearing both by the Y.W.C.A. and the School-Age Parent Center held up well - at least during the first few months after leaving school. There is a slight difference on how the Y.W.C.A.-School-Age Parent Center programs are viewed by those who did not make it through high school and those who did. Those who completed high school had more positive perceptions in all nine categories than those who didn't. These results could reflect a greater ability to cope with "baby" problems on the part of the School-Age Parent Center high school graduates. In any event, these data suggest high levels of satisfaction for these categories by all respondents to our questionnaire.

TABLE 21

STUDENT OBSERVATIONS ABOUT BABY-RELATED
INFORMATION PROVIDED BY THE SPC & THE Y.W.C.A

"I feel well-informed about by baby's needs for ("Yes" Responses)":

	79-82 GROUP		82-85 GROUP	
	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPC & H.S. GRADS
General health care	74%	100%	64%	92%
Nutrition	78%	88%	71%	84%
Safety	78%	94%	71%	84%
Care when sick	74%	88%	78%	84%
Immunization (Shots) . . .	78%	88%	71%	88%
Bathing	78%	94%	78%	92%
Feeding	78%	94%	71%	84%
Discipline	65%	70%	71%	80%
Love	78%	88%	71%	92%

CHAPTER V

RECOMMENDATIONS

Our recommendations represent a program for action. We intend them to be relevant and practical. The programs conducted by the Y.W.C.A. are a primary focus. But we realize that in the final analysis, all share in the larger concern: what recommendations, supported by research, will best aid pregnant and parenting teenagers.

Eight recommendations follow. They are based upon not only our research findings but upon recommendations from other reports cited in this document. While the recommendations represent a bottom line, we urge the reader to study the complete report in order to sense its full meaning and applications particularly to counseling and instructional programming.

RECOMMENDATION ONE: Data-gathering must be continued.

New programs, such as those we have studied and reported on in this study, need time to be worked out. Any follow-up evaluation should be held off until early trials are completed and adjustments made. A nationally-known educator, Dr. Theodore Sizer, suggests allowing a new program ten years of trial, error and correction before a formal assessment is mounted. This does not mean that rigorous internal evaluations should not take place nor does it mean that outside consultants can't be brought in to help with specific issues. A sound design for collecting and monitoring data is essential. An instrument to achieve this object

will be presented separately to the Y.W.C.A.

RECOMMENDATION TWO: More girls must be served.

Few would disagree that we need to serve more girls than is presently the case. The current School-Age Parent Center program reaches fewer than one pregnant girl in twenty-four and fewer than one in thirteen who decides to have her baby. It can be argued that the School-Age Parent Center program represents an option and girls can't be forced to enroll in it. Even in the face of such rationalizations, a more comprehensive program should be considered. An additional issue is the closing each summer of the School-Age Parent Center. For one-fourth of the year pregnant and parenting girls are on their own. Under such an arrangement, whose interests come first?

"The Helping Fair," now a regular annual event, is one kind of answer to reaching more girls. Over sixty agencies cooperate in presenting information on education, support services and health matters. Approximately six thousand attended the last fair. But such an event is limited and far from being a solution.

The recent expansion of "Project Redirection," now managed by the Y.W.C.A., will lead to more teenagers receiving support. Except for infant day care programs, the Y.W.C.A. is expected to channel its future activities on behalf of pregnant students to Project Redirection.

RECOMMENDATION THREE: The School-Age Parent Center should become a diploma granting high school.

RECOMMENDATION FOUR: The principal of the School-Age Parent Center, as a school official, should coordinate services for all pregnant girls in the El Paso Public Schools. Furthermore, the principal should plan and provide

educational programs to school people, from secretaries to principals, to assure support and consistent treatment for pregnant and parenting students and their families.

Texas has many fine small high schools and it could have one more in the School-Age Parent Center. By raising the status of the School-Age Parent Center we would raise the status of girls in attendance. As a high school, summer programs could also be arranged for students in need. A model, New Futures School in Albuquerque, is close at hand. New Futures School is on the leading edge of teenage pregnancy issues and develops new programs and approaches on a need basis. Conditions in Albuquerque are not greatly different from those in El Paso. By accepting New Futures School as a model El Paso can advance more rapidly and with greater confidence in the outcome. New Futures School have designed their own programs and produced an impressive collection of educational materials.

The fourth recommendation follows from the testimonials we heard any from Representative Mary Polk's recent report to the House of Representatives. The treatment of pregnant and parenting students leaves much to be desired. At best, attitudes held about these girls are inconsistent and at worst needlessly insensitive. A fifteen-year old with a child can only be expected to cope with a limited number of issues: school people must be viewed as mentors and friends. School counselors can be of major support and assistance to the School-Age Parent Center principal. As a principal the School-Age Parent Center leader will attend meetings held for principals, in equal status, and School-Age Parent Center programs and activities will profit accordingly.

RECOMMENDATION FIVE: A comprehensive program for pregnant and parenting teenagers should be designed and coordinated by the School-Age Parent Center principal.

While quality of services is the salient issue, most of the research reports we studied recommended that a triad of services - education, medical and support - be provided for these girls. The Y.W.C.A. advance work and involvement signals that this approach has a good start. Project Redirection is to coordinate its activities with state agencies such as the Department of Health. There are, as the Helping Fair showed, as many as forty public and private organizations that commit considerable resources to aiding pregnant and parenting teenagers. The present informal and only partly coordinated program needs cohesion and guidance. School is the one place these girls can be found. The School-Age Parent Center principal should take on the task of developing a coordinating board. Once more, it would be wise to see how New Futures School leaders get organizations to pitch in. Problems in the home school are not unique to El Paso. New Futures School reports that "over" thirty percent of their students were recruited from girls who had dropped out at school. The responsibility for making every effort to assure that these girls graduate from high school is system-wide and does not rest with the School-Age Parent Center-Y.W.C.A. All school personnel must exercise a high degree of sensitivity in working with pregnant and parenting students: with control and authority goes the need to be compassionate. The many people in El Paso schools now who do show compassion when working with these girls must be joined by others to develop a consistent support system.

It is unreasonable to leave all the issues that pregnancy brings

about with the public schools even with assistance from the Y.W.C.A. A community-wide approach takes thought, energy and patience to evolve, but it's the soundest way to proceed.

RECOMMENDATION SIX: Support should be provided to a pregnant student as soon as the pregnancy is recognized and be continued until at least a year after completing high school.

By arranging to have the principal of the School-Age Parent Center associated with other public schools, the process of early comprehensive support can be inaugurated. The two pressing needs at this time: early medical attention and more counseling. Responses to the questionnaire offered evidence of (and a guide to) the problems that accompany pregnancy. The questionnaire tells us that at this stage matters of health and of communicating their situation to others are uppermost on the girls' minds. After delivery and after leaving school the issues of health remain to be joined by employment and financial support concerns. At all times interpersonal problems are prominent. When girls were asked if they would like to join a post-high school support group, three-fourths said "yes" (the proportion would have been higher, but several stated they were moving). By way of Project Redirection the Y.W.C.A. may well be able to contribute to the need to provide help at the onset of the recognition of pregnancy - help that continues into the post high school period.

RECOMMENDATION SEVEN: The counseling program needs to be strengthened.

The evidence on the usefulness of counseling activities are consistently made by those seventy-nine students who completed the questionnaire. When we compare the 79-82 and 82-85 groups the relevance

of counseling is driven home even more. The national research gives support to the need for and benefits of counseling. The New Futures School in Albuquerque has heard the message: with about two and a half as many students attending as here in El Paso, there are six full-time counselors. Counseling is the conduit to psychological support, planning, referrals, employment advice, education, working with relatives and child care guidance. Counseling is needed for long-term problems and for helping with immediate crises.

We note that the drop-outs are apt to be older in grade, to enter the School-Age Parent Center with three or four years to go before graduation, and tend also to be recipients of free lunches and to have slightly lower grade-point averages. These issues are fertile ground for counseling.

RECOMMENDATION EIGHT: The local Department of Human Services needs to make greater use of data now being collected on cases of reported child abuse.

More needs to be learned about child abuse. Our mandate was simply to learn if those who attended the School-Age Parent Center were more or were less frequently reported for child abuse. While this initial investigation served a purpose, we need to have a more comprehensive picture of child abuse. The evidence is already in the Department of Human Services computers. We need data on age, sex, race and socio-economic background in order to develop approaches and programs to combat child abuse. At the same time such date will be useful when making comparisons with those who attend the School-Age Parent Center-Y.W.C.A programs.

APPENDICES

APPENDIX A

SPC STUDENTS WHO BECMAE PREGNANT
IN ELEMENTARY OR JUNIOR HIGH SCHOOL

9th graders attending J.H.S. are also excluded. Girls attending SPC for two school years are counted for the first only.

YEAR	TOTAL	6th	7th	8th	9th
79/80	13		14 yrs. 1 1	14 yrs. 2 15 yrs. 1 4 16 yrs. 1	14 yrs. 3 15 yrs. 4 8 16 yrs. 1
80/81	11	11 yrs. 1 1	13 yrs. 1 14 yrs. 1 2	13 yrs. 1 14 yrs. 1 3	14 yrs. 2 15 yrs. 3 5
81/82	17	12 yrs. 1 1	12 yrs. 1 13 yrs. 1 3 14 yrs. 1	12 yrs. 1 13 yrs. - 6 14 yrs. 2 15 yrs. 2 16 yrs. 1	13 yrs. 1 14 yrs. 2 7 15 yrs. 1 16 yrs. 2 17 yrs. 1
82/83	26		14 yrs. 1 15 yrs. 1 2	13 yrs. 2 14 yrs. 2 11 15 yrs. 3 16 yrs. 4	yrs. 5 yrs. 4 13 yrs. 3 17 yrs. 1
83/84	26	12 yrs. 1 1	13 yrs. 2 14 yrs. 4 7 15 yrs. 1	14 yrs. 1 15 yrs. 2 3	14 yrs. 4 15 yrs. 7 15 16 yrs. 1 17 yrs. 2 18 yrs. 1
84/85	22	12 yrs. 1 1	12 yrs. 1 13 yrs. 1 3 15 yrs. 1	13 yrs. 2 14 yrs. 2 7 15 yrs. 3	14 yrs. 2 15 yrs. 5 11 16 yrs. 3 17 yrs. 1

APPENDIX B

The 1980 census for SMSA El Paso reports 17,644 children "Ever Born" to women 15-24. Since 73 of these are School-Age Parnet Center mothers and other mothers in these age brackets have two or more children, we developed our female estimate on the figure 16,500. Next we took thirty percent of the total number of child abuse reports for the year 1983 (1974 x .30 = 592).

Thus we hypothesized that "others" (older females and males of all ages) would be involved in 70 percent of reported child maltreatment cases. We held in mind that approximately sixty percent of abuse episodes nationally are attributed to females. Finally, we consider our figure decisions as on the conservative side.

The resulting formula:

592 divided by 16.500 = a ratio of 1 to 28

In dealing with social problems the issue of prevention is of greatest importance. The ingredients that constitute the School-Age Parent Center-Y.W.C.A. programs appear to include highly effective antidotes to child abuse.

APPENDIX C

A SAMPLE OF QUESTIONS RAISED BY TEENAGERS ON THE SUBJECT OF SEX

"How many times do you have to have sex to get pregnant?"

"If neither one of the couple has VD or Gonorrhea can they get one of those disease by having sex?"

"Can a girl become pregnant when she is on her period?"

"Where can a girl get help if her father, brother, uncle, family member gets her pregnant and the family wants to protect the male?"

"Do all guys get hot when on a date with a girl? If so, what are some methods to kool them?"

"Is it true you can't get pregnant if you do it standing up?"

"If you drink do the babies come deformed or what?"

"How young can a girl get pregnant?"

"When is a virgin unvirginized?"

"If a couple has sex during menstruation process, is it true the guy becomes sterile?"

"When will they might pass the law about getting contraceptives only with their parents permission?"

"What if you have a boyfriend and he wants to have sex and you don't and he tells you if you don't he is going to tell all the guys that he has had sex with you?"

"If a little girls gets raped by an older man, and she hasn't started her period can you get pregnant?"

"If a man and women are having intercourse, how does the man know when his sperm is released so he can take his penis out?"

"When a guy and a girl are going together and he wants to have sex but isn't pushing her to do it because he understands her decision it is O.K. if the guy has sex with some other girl? Should his girlfriend understand him?"

"How come parents don't want to tell their kids about sex?"

"What is the relationship between sex and love?"

APPENDIX D

"Agencies that helped my baby and me _____" Ranked and Compared.

	RANKINGS			
	79-82		82-85	
	SPC GRADS	SPC & H.S. GRADS	SPC GRADS	SPC & H.S. GRADS
"Food Stamps"	1	1	4	-
"AFDC"	2	2	2	2
"WIC"	3	3	1	1
"Medicaid"	-	4	3	3

Note: A. Mentioned one or twice: "religious organizations," "SSI," "general assistance" and "HUD."

72

ABOUT THE AUTHOR

Dr. Ronald Jackson has extensive experience in management, consulting, research and international education. He has authored two books and numerous articles. He served on a task-force in the mid-sixties that drew up a master plan for public education in Massachusetts. Later Dr. Jackson was executive officer of the Harvard-Boston school planning project. In 1978 he was a senior consultant to the Ministry of Education of Cyprus. Other assignments have taken him to Greece, Taiwan, Germany and Mexico.

In recent years Dr. Jackson has focused increasingly on communications issues and human relations. In addition to his consulting, he serves on the faculty of El Paso Community College.

Dr. Jackson resides in El Paso, Texas with his wife, Lisa. They miss few opportunities to travel, especially to Europe. The Jacksons have three grown offspring: Susan, Duncan and John.